The study included 286 patients; interviews were used to obtain baseline data. Medical-record reviews, performed by study nurses to document the development of pressure ulcers, were estimated using category-specific cost-to-charge ratios.

The differences in costs and length of stay for those with and without incident pressure ulcers were even greater when adjusted for admission predictors and also the occurrence of nosocomial infections and other complications ($29,048 vs $13,819, P=.002, and 20.9 vs 12.7 days, P=.001, respectively). The authors concluded that incident pressure ulcers are associated with substantial and significant increases in hospital costs and length of stay.
