THE SACS™ INSTRUMENT
ASSESSING AND CLASSIFYING
PERISTOMAL SKIN LESIONS
Content Validated¹

Disclaimer. The information provided herein is intended to assist the clinician in providing patient care based on best practices for ostomy management. The content of this program is not intended as medical advice and does not represent an exhaustive treatment of the subject matter. This program should be used as a guideline and all recommendations must be considered in view of the patient’s medical condition and the latest package insert information.

PURPOSE & OBJECTIVES

PURPOSE:
To provide education and training on how to accurately assess and classify a peristomal skin lesion using the SACS™ instrument.

OBJECTIVES:
After reviewing the training module and passing the scenario test, you will be able to:

– Assess and classify the peristomal skin condition using the photo-image guide with corresponding lesion definitions (Type of Lesion – L)

– Identify the location of the lesion on the peristomal plane using the clock-face visual guide (Topographical Location – T)

– Document a patient’s SACS™ classification with the appropriate L (Type of Lesion) and T (Topographical Location) language
This program is broken into three (3) educational modules and a self-test to assess your understanding:

Module 1: Overview

Module 2: How to Use the SACS™ Instrument

Module 3: Clinical Scenarios

Module 4: Self Assessment
“The peristomal skin should be intact with no evidence of redness, loss of epidermis or sensations such as itchiness, warmth, or pain”

WHAT IS A PERISTOMAL SKIN LESION?

- **ANY** compromise in the integrity of the skin around the stoma
- **Negative outcome of living with an ostomy**¹
- **Wide range of incidence rates:**
  - 10.2-40% (review of 7 studies)¹
  - 18-55% ²
- **Lack of consensus concerning stomal and peristomal complications does not allow for comparison of prevalence rates**³

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WHERE ARE PERISTOMAL SKIN LESIONS LOCATED?

- Under the hydrocolloid adhesive of the skin barrier
- Under the tape collar of the skin barrier
- Immediately outside the border of the skin barrier
WHAT IS THE SACS™ INSTRUMENT?

• An evidence-based instrument developed out of a clinical need

• A systematic literature review revealed that no universal system existed to objectively classify peristomal lesions according to type and location

• The SACS™ Instrument was developed to help establish a standard language for the assessment and classification of peristomal lesions

• A simple, 3-step process easily understood by all health care providers

(note: Although the SACS™ Instrument can serve as a guide for all health care providers, it is not intended to replace specialized formal education nor advanced assessment by a Wound Ostomy and Continence Nurse (WOCN))
CLINICAL BENEFITS OF THE SACS™ INSTRUMENT

• Provides operational definitions for the consistent interpretation of peristomal skin lesions

• A content validated measurement instrument to classify lesion type and location (CVI=0.94 out of 1)\(^1\)

• An objective classification system to document the incidence of peristomal skin lesions
**MODULE 2**

**How to Use The SACS™ Instrument**

**SACS™ Instrument At-A-Glance**

1. **Step 1**
   - Assess and Classify Lesion (L1-LX)

2. **Step 2**
   - Identify Lesion Location (TI-TV)

3. **Step 3**
   - Document (L & T)

**SACS™ Classification Examples**

SACS™ Classification: L2, TV
• Progressive dependent upon the depth of skin involved

**L1**
Hyperemic Lesion
Peristomal redness with intact skin

**L2**
Erosive Lesion
Open lesion not extending into subcutaneous tissue; partial-thickness skin loss
• Only difference between L3 & L4 is the presence of necrotic, non-viable tissue

**L3**
Ulcerative Lesion
Open lesion extending into subcutaneous tissue and below; full-thickness skin loss

**L4**
Ulcerative Lesion
Full-thickness skin loss with non-viable, dead tissue (necrotic, fibrinous)
PERISTOMAL SKIN LESION DEFINITIONS

• LX is proliferative, or a “build-up” rather than a tissue destruction by erosion

**LX**

Proliferative Lesion
Abnormal growths present (i.e., hyperplasia, granulomas, neoplasms)
HOW TO ASSESS A PERISTOMAL LESION USING THE SACS™ INSTRUMENT

- Stoma quadrants, not anatomical quadrants
- Clock-face orientation

**TI**
Left Upper Peristomal Quadrant (12 to 3 o’clock)

**TII**
Left Lower Peristomal Quadrant (3 to 6 o’clock)

**TIII**
Right Lower Peristomal Quadrant (6 to 9 o’clock)

**TIV**
Right Upper Peristomal Quadrant (9 to 12 o’clock)

**TV**
All Peristomal Quadrants
THREE SIMPLE STEPS

**SACS™ Instrument At-A-Glance**

**Step 1**
Assess and Classify Lesion (L1-LX)

**Step 2**
Identify Lesion Location (TI-TV)

**Step 3**
Document (L & T)

**SACS™ Classification Examples**

- SACS™ Classification: L2, TV
- SACS™ Classification: LX, TII & TIII
Implementation Materials for your Practice

Brochure
includes Ruler
And a Badge
Wall Chart 24x36 inches
Tear Pad Teaching Guide
8 ½ x 11 inches
Post-it Note Tablet
Place on Patient Chart

The SACS™ Instrument Ruler
A content-validated clinical instrument for objective assessment and classification of peristomal skin lesions.¹

<table>
<thead>
<tr>
<th>Type of Lesion (L)</th>
<th>Topographical Location (T)</th>
</tr>
</thead>
<tbody>
<tr>
<td>L1 Hyperemic lesion Peristomal skin reddening with infect skin</td>
<td>T1, T2, T3, T4</td>
</tr>
<tr>
<td>L2 Erosive lesion Open lesion not extending into subcutaneous tissue; partial-thickness skin loss</td>
<td>T1, T2, T3, T4</td>
</tr>
<tr>
<td>L3 Ulcerative lesion Open lesion extending into subcutaneous tissue and below; full-thickness skin loss</td>
<td>T1, T2, T3, T4</td>
</tr>
<tr>
<td>L4 Ulcerative lesion Full-thickness skin loss with non-viable, dead tissue (necrotic, fibrous)</td>
<td>T1, T2, T3, T4</td>
</tr>
<tr>
<td>LX Proliferative lesion Abnormal growths present (e.g., hyperplasia, granulomas, neoplasia)</td>
<td>T1, T2, T3, T4</td>
</tr>
</tbody>
</table>

Patient #/Initials/Name: ___________________________  Clinician Name: ___________________________

SACS™ Classification (L,T): ___________________________  Date: ___________________________
Time: ___________________________  Location: ___________________________

¹ SACS™ was developed and validated for use in the clinical setting. This instrument is intended for use in the clinical setting.
The following two examples were designed as practice exercises. An image of a peristomal lesion will appear on the screen and the program will pause. When you have completed observing the lesion and have classified it according to the SACS™ Instrument, the answer will be provided.
SELF ASSESSMENT

INSTRUCTIONS:

As you view each slide, evaluate the lesion by following the easy three step process outlined on the SACS™ Ruler

1. Assess and classify
2. Identify lesion location
3. Document
LESION # 1

L___, T___
LESION # 3

L___, T___
LESION # 4

L___, T___
LESION # 5

L___, T___
Well done! You have completed the educational training module on how to accurately assess and classify a peristomal skin lesion using The SACS™ Instrument.

Implementing The SACS™ Instrument provides:

- Operational definitions for consistent interpretation of peristomal skin lesions
- A content validated measurement instrument to classify lesion type and location (CVI=0.94 out of 1)\(^1\)
- An objective classification system to document the incidence of peristomal skin lesions
Conclusion

Thank you for participating in the SACS™ Instrument educational module. To access the tools needed to implement SACS™ in your practice, please see the instructions below.

For Implementation Materials:

• **Print Materials** = All materials are available in full color print form. Please contact your ConvaTec Sales Representative for print copies.

Don’t know who your representative is? Call the ConvaTec Interaction Center (CIC) at 1-800-422-8811 for the name and contact information of your ConvaTec representative.