

# Gosnell Measure

## Assessment Overview

### Assessment Area

**ICF Domain:**

Body Function

**Subcategory:**

Functions of the Skin

### You Will Need

**Length:**

5 items – less than 30 minutes

**Scoring:**

Items are scored on a 1-3, 1-4, or 1-5 scale.

A summary score is produced by summing item scores; the summary score ranges from between 5 (worst prognosis) to 20 (best prognosis).

### Summary

The Gosnell Measure was developed to identify individuals living in extended care and over the age of 65 who were at risk for developing a pressure ulcer.

Patients are evaluated on 5 domains:

1. Mental status
2. Continence
3. Mobility (the amount and control of movement of one's body)
4. Activity (ability to ambulate)
5. Nutrition (the process of food intake)

Evaluation also includes a recording of vital signs, skin conditions, and medications, but these are not scored.

### Availability

**Worksheet:** Can be found [here](#).

## Assessment Interpretability

### Minimal Clinically Important Difference

Not established in SCI

### Statistical Error

Not established in SCI

### Typical Values

Not established in SCI

## Measurement Properties

### Validity – **Low**

**Low Correlation with the stage of the first pressure ulcer and the number of ulcers developed.**

$r=0.254$

**Low Correlation with the stage of the number of ulcers developed.**

$r=0.297$

**RANKING N/A:** the Gosnell measure was 62.2% accurate in predicting pressure ulcer development; it has a sensitivity of 18.4% and a specificity of 90.4%.

(Salzberg et al. 1999, n=226; 188 males, 38 females; mean (SD) age: 33.2 (15.2) years; acute/traumatic SCI)

**Number of studies reporting validity data: 1**

### Reliability – **Not Established in SCI**

Not established in SCI

**Number of studies reporting reliability data: 0**

## Responsiveness

### Floor/Ceiling Effect:

Not established in SCI

### Effect Size:

Not established in SCI

### Number of studies reporting

**responsiveness data: 0**