

## Wound Care Referral

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Wound Care Referral Type

Please check one option below.

- ☐ **Evaluate and Treat.** Wound assessment and treatment will be managed by the Treatment Center. Wound care orders will be transitioned to Dr. Stenstorm the Medical Director of the Treatment Center. Evaluation and management of wounds performed at the Treatment Center will be performed by the wound care team under the supervision of the Director. This includes but is not limited to the following:
- a. Orders involving topical wound management, diagnostic imaging, vascular assessment related to diagnosis of wound etiology
  - b. Imaging and labs to rule out osteomyelitis.
  - c. Referrals to other providers related to etiology of the wound.
  - d. Reassessment and changes in the wound care plan.
  - e. Wound culture and antibiotic management for wound healing.
  - f. Treatment Plan/Care Orders:
    - I. RN to assess & adjust wound care dressings.
    - II. Sharp debridement by qualified wound care nurse as needed.
    - III. Topical Lidocaine 1-4% as needed to control pain with dressing change
    - IV. Swab Wound Culture if indicated.
    - V. Silver nitrate sticks for minor bleeding, hypertrophic granulation tissue
    - VI. Enzymatic debridement (i.e. Santyl)
    - VII. Cleanse wound with saline and or wound cleanser of choice
    - VIII. Apply advanced wound dressings to: promote moist wound healing, control drainage, and decrease bioburden using the following categories of dressings: gel, honey, alginate, hydrofiber, foam, antimicrobial agents, hydrocolloid, collagen, specialty absorptives
    - IX. Negative pressure wound therapy
    - X. Obtain Rx for appropriate wound care supplies and teach Pt/Caregiver wound care and dressing changes.
    - XI. Dressing change frequency as needed to control exudate.
  - g. Updates on wound progress and care plans will be provided when requested by the referring provider

- ☐ **Evaluate.** Wound care treatment is managed by the wound care team under the orders of the referring primary provider, who is willing to continue to sign orders and return them via fax to the Treatment Center.

- a. Treatment Plan/Care Orders:
  - I. RN to assess & adjust wound care dressings.
  - II. Sharp debridement by qualified wound care nurse as needed.
  - III. Topical Lidocaine 1-4% as needed to control pain with dressing change
  - IV. Swab Wound Culture if indicated.
  - V. Silver nitrate sticks for minor bleeding, hypertrophic granulation tissue
  - VI. Enzymatic debridement (i.e. Santyl)
  - VII. Cleanse wound with saline and or wound cleanser of choice
  - VIII. Apply advanced wound dressings to: promote moist wound healing, control drainage, and decrease bioburden using the following categories of dressings: gel, honey, alginate, hydrofiber, foam, antimicrobial agents, hydrocolloid, collagen, specialty absorptives
  - IX. Negative pressure wound therapy
  - X. Obtain Rx for appropriate wound care supplies and teach Pt/Caregiver wound care and dressing changes.
  - XI. Dressing change frequency as needed to control exudate.
- b. Reassessment and changes in plan of care will be communicated via fax.
- c. Wound cultures will be communicated via fax and antibiotic management will be determined by the referring physician

- ☐ **Wound care.** Specific wound care treatment orders will be provided by the ordering physician. All will be directed by the referring provider.

**Wound care orders:** \_\_\_\_\_

Referring Provider signature: \_\_\_\_\_ Date: \_\_\_\_\_