Grand Rounds

Comprehensive Wound Management

The Wound Care Center[®] provides care to patients with wound healing problems. The Center's medical staff will evaluate and treat patients representing a wide range of acute and chronic wound healing failure problems.

Comprehensive wound management requires a physician driven, multidisciplinary based program that directs critical resources required for evaluation and treatment to patients suffering from wound healing failure. Traditional approaches to the management of these patients have typically been ineffective. Successful management of these challenging problems can easily exceed the capabilities of the individual physician's office due to the complexity and time consuming nature of the care required. The Wound Care Center will be providing this highly specialized care that many of these patients require.

Diabetic wound healing problems have a major impact on patient quality of life and represent a significant portion of all health care dollars spent. Venous leg ulcers represent the largest category of outpatient chronic wounds in most industrialized countries with a frequency of almost 500,000 new ulcers developing annually. Diabetic foot ulcers affect over 25 percent of the 30 million diabetics in the U.S. and account for more than half of all lower extremity amputations in a subset representing only 9.4 percent of the total population. In these patients who progress to lower





extremity amputation, the 3 year mortality approaches 40 percent. Pressure ulcers account for the largest wound

category in institutionalized patients who are frequently debilitated by multiple medical problems, malnutrition, and mobility impairment. Evidence has shown that when these patients are evaluated and managed within a

comprehensive wound care program, morbidity is decreased and outcomes improved.

The Wound Care Center provides a structured patient assessment

process including a complete assessment of local and systemic factors affecting wound healing, comorbidities that impact response to treatment, peripheral vascular assessment including transcutaneous PO₂ measurement and other diagnostic interventions as required. This initial assessment is designed to address the specific pathophysiology of wound healing failure and to develop a patient and wound specific plan of management

Hyperbaric Oxygen Therapy greatly increases the amount of oxygen delivered to body tissues by your blood. and care from evidence and best practice based Clinical Practice Guidelines. A treatment plan is developed by a specially trained wound care

physician and may involve local wound debridement, specialized topical wound care, local edema control, local and systemic antimicrobial therapy, revascularization or angio-plasty, recombinant growth factor therapy, bioengineered tissue grafts and dermal substitutes, negative pressure wound therapy (V.A.C.®), and off loading and protection (see figure 1). Patient nutritional and rehabilitation needs are also addressed. When requested by the referring physician, the Center's wound care specialist physicians can also assist in arranging recommended

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medical and surgical specialist physician consultations.

The Wound Care Center is affiliated with Healogics[™] and participates in networking with wound care specialist physicians around the country, benchmarking of clinical outcomes, continuing medical and nursing education, and access to the most advanced wound care technology.

Referral to the center should be made whenever one or more of the following criteria have been met:

- Full or partial thickness wounds that fail to show significant progress toward healing after four weeks of conventional treatment
- Full thickness wounds with exposed tendon, bone, and/or joint capsule
- Wounds occurring in immune compromised patients or in patients with diabetes mellitus or peripheral vascular disease
- Rapidly progressive, necrotizing soft tissue infections (including clostridial myonecrosis, necrotizing fasciitis)
- Refractory osteomyelitis
- Radiation tissue injury (including soft tissue radionecrosis and osteoradionecrosis)
- Crush injury, compartment syndromes, and other acute traumatic ischemias or compromised or failing skin grafts or flaps when hyperbaric oxygen treatment may be considered for limb or tissue survival.



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