

# Framework for Wound Care Excellence

## 1. Non-Healing Wound Assessment Protocol

- **Patient History:** Document comorbidities (e.g., diabetes, PAD, CKD), medications, lifestyle factors, lab / blood work-up
- **Wound Characteristics:**
  - Etiology (e.g., pressure, vascular, diabetic, trauma, other)
  - Stage/classification (e.g., Wagner, NPIAP)
  - Size, depth, tunneling, undermining
  - Drainage type and amount
  - Peri-wound skin condition
  - Treatment received for the non healing wounds
- **Diagnostic Tools:**
  - ABI/TBI for vascular status
  - Lab evaluation and diabetes assessment
  - Imaging (MRI, X-ray) for osteomyelitis
  - PCR-based infection testing
- **Care Plan Development:** Based on wound type, healing potential, and patient goals.

## 2. Classification of Chronic Wounds

Type	Description
Diabetic Foot Ulcers (DFU)	Neuropathic, ischemic, or mixed
Venous Leg Ulcers (VLU)	Often medial ankle, shallow, exudative
Pressure Injuries	Over bony prominences, staged I–IV
Post-Surgical Wounds	Dehisced or infected incisions
Burns	Thermal, chemical, electrical
Atypical Ulcers	Pyoderma gangrenosum, vasculitis
Traumatic Wounds	Lacerations, abrasions, crush injuries

Sinus Tracts

Often associated with deep infection

### 3. Staging and Classification Systems

- **Pressure Injuries:** NPIAP staging
- **DFUs:** Wagner, University of Texas classification
- **Burns:** Depth-based (superficial, partial, full-thickness)
- **Wound Healing Phases:** Hemostasis → Inflammation → Proliferation → Remodeling

### 4. Advanced Wound Therapies

- **NPWT (Negative Pressure Wound Therapy)**
- **Skin Substitutes:** Biologic, synthetic, cellular matrices
- **Ultrasound Therapy:** Low-frequency for debridement and healing
- **Collagen Products:** Promote granulation and epithelialization
- **Surgical Procedures:** Debridement, flap closure, grafting

### 5. Providers of Advanced Wound Care

- **Physicians:** Internist, wound-care trained physicians, Vascular surgeons, podiatrists, plastic surgeons, infectious disease, Wound care certified Nurse practitioner / Physician Assistants
- **Nurses:** WOCNs, CWCNs, wound care specialists
- **Allied Health:** Physical therapists, dietitians, social workers
- **Non-Clinical Staff:** Trained case managers, prior auth specialists

### 6. Skin Substitutes: Usage & Options

- **Indications:** Non-healing wounds >4 weeks, poor granulation, exposed structures
- **Types:**
  - Placental-derived grafts from amniotic tissue (available product choice from PMC)
  - Acellular dermal matrices (e.g., porcine, bovine)
  - Cellular products (e.g., fibroblasts, keratinocytes)
- **Usage Guidelines:**
  - Apply after debridement and ascertain that there is no active infection in wound bed. Consider PCR testing of the wound bed and send samples to PMC in network lab for processing
  - Combine with NPWT or compression if indicated
  - Monitor for integration and healing

## 7. Protocols for Ordering Skin Substitutes

- **Standardized Criteria:**
  - Non healing wound with documentation of conservative care
  - Failure of conservative therapy
  - Documentation of wound measurements and staging
  - Stage 1 and stage 4 wounds are not approved for skin substitutes.
- **Approval Workflow:**
  - Clinical documentation checklist
  - Prior authorization template
  - Contraindication of use of skin substitutes

## 8. Multidisciplinary Approach

### Referral Pathways:

- Vascular evaluation as indicated
- Endocrinology for diabetes management as indicated
- Nutrition consults as indicated
- Physical therapy for offloading or home care
- **PMC Network Integration:**
  - Shared EMR access
  - Referral tracking dashboard
  - Monthly case review meetings

## 9. Holistic Management of Chronic Conditions

- **Diabetes:** Glycemic control, foot exams, endocrinology follow-up
- **Nutrition:** Protein intake, vitamin C, zinc, hydration
- **Vascular Insufficiency:** ABI screening, revascularization
- **Offloading:** Total contact casting, orthotics
- **Postoperative Wounds:** Suture line care, infection prevention
- **Debridement:** Frequency based on wound type and exudate

## 10. In-Network Referrals & Continuum of Care

- **Provider Directory:** Wound-certified clinicians, specialists
- **Care Coordination:**
  - Transition from hospital to outpatient
  - Home health wound care
  - Telehealth follow-ups

## 11. Infection Testing & Management

- **PCR-Based Testing:**
  - Faster, more accurate pathogen identification
  - Resistance profiling
- **Treatment Protocols:**
  - Topical vs systemic antibiotics
  - Biofilm management
  - Antimicrobial dressings

## 12. Non-Clinical Staff Guidelines

- **Support Roles:**
  - Prior authorization specialists
  - Referral coordinators
  - EMR documentation assistants
- **Training Modules:**
  - Wound terminology
  - Coverage criteria for advanced therapies
  - Communication scripts for provider offices