Patient Education



Please review and place in an easy to view location. These instructions are ESSENTIAL components to your wound healing progress and goals.

Patient Name:	

Pressure Ulcers-

Repositioning-

Sacrum- Offload wound area every hour for 2 minutes or every 15 minutes for 15 seconds. Sleep on the unaffected side or turn side to side. Monitor unaffected areas for redness or breakdown.

Heel- Float heels on a pillow in bed/chair. Limit use of contact with footwear

<u>Dressings-</u> Keep dressings clean, dry and intact. Do not allow wounds to be left open to air. Contact home health for dressings that are 75% or more saturated

Diabetic Foot Ulcers (DFUs)-

<u>Nutrition-</u> Limit intake of simple carbohydrates and sugars <u>Blood Sugar-</u> Goal is a fasting morning blood sugar under 125 <u>Hemoglobin A1C-</u> Goal is under 7. Please provide the office or staff with most recent lab work

Venous Leg Ulcers (VLUs) and Edema-

<u>Compression-</u> necessary for VLU healing. Do not remove unless instructed by the Nurse Practitioner or Home Health nurse. OK to use pneumatic compression pumps while compression wraps or garments are in place.

Elevation- Keep legs elevated when in a seated position

<u>Exercise</u>- walking is necessary to activate the calf pump to discourage venous stasis and congestion. Avoid standing still, pace or walk in place if static.

<u>Sodium restriction-</u> Sodium encourages water retention and promotes edema which discourages wound closure. Limit sodium to 2000 mg/day

Medication- take diuretics as ordered by PCP, cardiology or nephrology

General-

Nutrition- ½ to 1 gram of protein per day per pound of body weight

Hydration- Unless you are on a fluid restriction, 48-64 oz of water per day

Supplements- Multivitamin w/ minerals 1x day, Vitamin C 500mg 2x day, Zinc

Sulfate 220mg 1x day, Wound Vite 2 caps 1x day or other L-arginine supplement 2x day

(Juven), Vitamin D3- 2000 i.u. 1x day