

SERENAGROUP NEWSLETTER

Building the Nation's Leading Wound Care Team

WOUND TREATMENT VS. ADVANCED WOUND CARE



THOMAS SERENA, MD, CEO

Earlier this month, I saw a patient who had received 6 weeks of intravenous antibiotics for green drainage from a large venous leg ulcer on her right leg. When the physician treating her wound insisted on placing a central line for 6 more weeks of antibiotics, she made an appointment with our advanced wound care clinic for a second opinion. Her history and a physical examination fit the classic presentation for venous insufficiency with multiple venous leg ulcers. An unpleasant sweet odor, characteristic of pseudomonas, filled the exam room when the nurse removed the drenched dressing. A fluorescence image confirmed the presence of extensive pseudomonas in the wound bed and on the surrounding skin. We started a regimen of debridement, antiseptics, a topical antibiofilm agent, low frequency ultrasound and compression wrapping. Copious drainage from the wound necessitated frequent visits to the center during the first week of treatment.

After one week the drainage decreased, the odor resolved, and her wounds began to heal. She was able to avoid the risks associated with an invasive procedure and systemic antibiotics as well as the significant expense associated with her former physician's plan.

There is a stark contrast between wound treatment and advanced wound care. Unlike most medical specialties, the care provided to patients with chronic wounds varies greatly between regions of the country, hospitals in the same city and even physicians in the same center. In one study, physicians followed evidence-based guidelines less than 35% of the time. The SerenaGroup® strives to standardize care across all its centers. A chart in the Baton Rouge clinic should look the same as one in the Omaha or Buffalo clinics. Standardization is key.

This month we began updating our algorithms, providing additional guidance on evidence-based advanced wound care. The new venous leg ulcer (VLU) algorithm is provided on our SerenaGroup's Member's Portal to allow easy access for all staff and providers. Look for further algorithms in the next several weeks from SerenaGroup. We will not rest until the care of patients with chronic wounds is consistent across the globe.



HBOT for the DFU Patient

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Ally George, HBO Tech & Community Educator



Healing a diabetic foot ulcer challenges the most experienced healthcare provider. The high levels of bacteria and infection in the ulcer, poor glucose control, underlying vascular disease and neuropathy, difficulties with offloading and patient compliance combine to frustrate the healing effort. Patients that fail to respond to standard wound care benefit from advanced therapy. Clinical trials demonstrate that HBOT accelerates healing in recalcitrant ulcers, reducing the risk of amputation.

How does hyperbaric oxygen therapy work?

HBOT induces the growth of new blood vessels, angiogenesis, through local and systemic means. The poorly perfused DFU benefits from the increased oxygenation that comes from angiogenesis. In addition, HBOT enhances the immune system reducing the negative influence of bacteria on healing. Finally, HBOT stimulates the production of growth factors that promote healing.

Develop a Healthy Eating Plan

Embracing your healthy-eating plan is the best way to keep your blood glucose level under control and prevent diabetes complications. If you need to lose weight, you can tailor the plan to your specific goals by working with your Physician & Dietitian.

If you have diabetes, it's important that you following your specific eating plan that works for you. Use healthy foods, portion control and schedule an appointment with a dietician to manage your blood glucose level. If you stray from your prescribed diet, you run the risk of fluctuating blood sugar levels and more-serious complications.

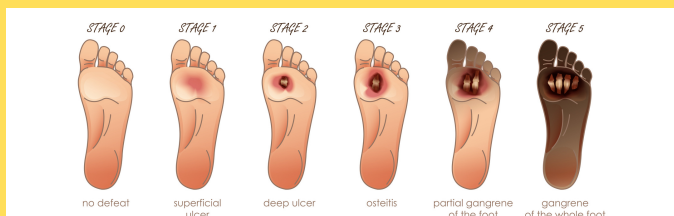
Understanding the Wagner Grade Classification System

- Grade 0 – intact Skin
- Grade 1 – superficial ulcer of skin or subcutaneous tissue
- Grade 2 – ulcers extend into tendon, bone, or capsule
- Grade 3 – ulcer with osteomyelitis, osteitis, pyarthrosis, cellulitis, or abscess
- Grade 4 – partial foot gangrene
- Grade 5 – whole foot gangrene

***Remember:** a Wagner Grade 2 that is complicated by infection is a Wagner Grade 3!

Wagner Grade Classification System

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Documentation & Supply Delays



Karen McCambridge, RN, BSN
Clinical Coordinator
Cleveland Clinic, Akron General
Advanced Wound Care & Hyperbaric Program

Those of us that work in the advanced wound care center, understand the importance of proper follow-up for chronic wounds to heal properly. We also know that supplies need to be on-hand when our patients arrive for their dressing changes. If supplies are not available at the time of the patient's appointment, it may be caused by missing or inaccurate documentation in the patient's chart.

Why is this of concern?

It is becoming difficult to obtain needed wound care supplies. It is important to ensure proper documentation to prevent delayed shipments, which could result in the delay of chronic wound healing. For staff in the advanced wound care center, when placing a supply order, a form for debridement, amount of exudate, wound measurements and thickness of the wound must be included in the documentation. This is key for staff and providers who work in the in the center to understand the process. SerenaGroup has developed educational materials, specific templates in the EMRs that serve as resources for staff and providers. Ensuring all the specifics (form of debridement, amount of exudate, wound measurements, thickness of the wound) are documented appropriately will help to streamline the process by eliminating delays and additional work., by doing so, the chronic wound will be on the path to healing.

Importance of Wound Measurement

Proper wound care measurements are essential when deciding on appropriate wound care supplies. SerenaGroups' Outpatient Policy OP.066.0 Wound Measurements is essential for all staff to understand.

Wounds are measured at the initial assessment, at all subsequent visits (no less than weekly) and prior to and after any debridement performed. The key for measurement is to be consistent with the length (the longest distance of the wound referencing head-to-toe direction), width (girth of the wound from left to right 3 to 9 o'clock) and depth (using a sterile cotton tip applicator, locate the deepest point of the wound measuring it at a 90 degree angle with the skin, to the level of the skin).

Helpful tips to remember when documenting and ordering supplies:

- Wounds must have a depth of at least 0.1 cm to be considered a wound.
- The only time a wound should have a depth of 0 cm is when it is completely healed.
- Wounds must be full thickness to qualify for wound care supplies.

Specifics on wound care supplies:

- Alginates and Allevyn foam dressings require a moderate amount of exudate present in the wound they they are to be covered by insurance.
- Allevyn foam dressings are not considered daily dressings, insurance typically covers only 12 a month.

*Remember that to cover payment for supplies, every thirty days insurance companies require documented debridement on a wound that is not surgically created.

When healing the chronic wounds, supplies are key to the healing process. The patient, staff and providers need to be onboard with the patient care path and have full understanding of the importance of the supplies and regular dressing changes. For the staff and providers, with the help of the experts within SerenaGroup, we are assured that documentation is complete and there are no missed steps on the patient's care path.



SerenaGroup Education

SerenaGroup recognizes that the key to continued success with positive clinical outcomes is education. Education is provided through different platforms to ensure the tools are available to our centers. Topics for March Education included (but not limited to):

- Journal Club: TBA
- HBO Safety: COVID-19 Infection Control
- Monthly Education: Patient Compliant & Grievance
- Roundtable Compliance Meeting
- Roundtable PD Meeting

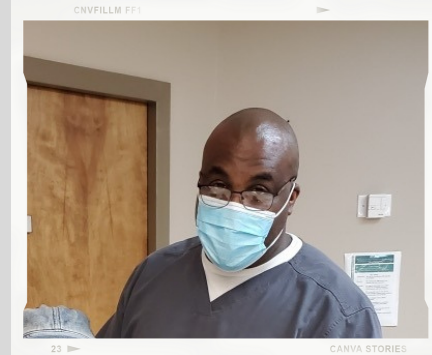
Education is one of many key benefits to partnering with SerenaGroup. We are Building the Nation's Leading Wound Care Team.

The Advanced Wound Care Conference

May 7, 2021 | New Orleans, LA
for more information visit:
www.serenagroupinc.com



SerenaGroup Blue Star Winner



Edward Coleman
Patient Care Coordinator

Edward is an excellent team player and will jump in to support all aspects in the clinic. We are lucky to have him as part of our Jackson Team.

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