



Lowe Plastic Surgery (LPS)

EXTREMITY PRESSURE SORE CARE INSTRUCTIONS

1. **Supplies Needed:** Soap (Dove or Lever 2000 unscented), Tap Water, Silvadene 1% cream, Telfa (non-adherent dressing), Webrill (soft cotton roll) 4", Ace bandage or Coban 4", Splint or medical boot.
2. **Wound care:** An open wound or pressure ulcer is not sterile. When cleaning a non-sterile wound it is important to use good hygiene by washing your hands first and using non-sterile gloves when others are dressing the wound. The wound care sequence:
 - Once a day clean the wound with soap and water, gently pat dry. (Avoid soaking in bath or dishwasher). Gently remove old creams or ointments and debris.
 - Apply Silvadene 1% Cream or other ointment as instructed to wound in a light layer.
 - Apply an non-adherent dressing like Telfa (Adaptic, Vaseline gauze)
 - Wrap the leg with Webrill (soft cotton roll) 4" from the toes to just below the knees. If Webrill is not available use Kerlex roll very carefully by wrapping loosely.
 - Then wrap Coban or an Ace bandage 4" over the dressing from the toes to just below the knee. Coban is better in patients that are ambulating or active.
 - Keep the extremity elevated while in bed and as much as possible when in a chair.
 - Walking is encouraged as long as the patient is stable and the dressing is in place
3. **Re-evaluation:** After the wound has been properly cared for it should be re-access to see if other procedures are required. Pressure ulcers are the result of pressure to the area for an extended time. If the ulcer is to heal it must be cleaned first and the pressure must be relieved over time. If the ulcer persist after proper wound care recommendations may include:
 - Local debridement
 - Change in wound care or medications
 - Wound clinic referral
 - VAC Application – suction wound device
 - Skin grafting
 - Surgical Reconstruction with regional or distant flap
 - Re-vascularization procedures
 - Hyperbaric Oxygen treatments
 - Secondary referrals
4. **Individualized care:** Lower extremity pressure wound care must be individualized. Each patient has different conditions and concerns that impact the options for care such as age, health, nutrition, location, and complexity. There are times when surgery is not appropriate or is contra-indicated. Please notify your physician:
 - Significant bleeding that does not stop after 15 minutes of continuous pressure
 - Wound becomes significantly red, swollen, hot, or is significantly oozing
 - You develop a persistent fever over 101.5 F°
 - Severe pain not controlled by medications

PSDA PHONE NUMBER: (405) 942-4300

Please call for all biopsy results if you have not heard from us within 2 weeks.

- Please feel free to call us at any time if you have questions or problems.