The SWRWCP’s Arterial Leg Ulcer Assessment and Management Algorithm

Person with an Arterial Leg Ulcer

Assess
- "Initial Wound Assessment Form"
- "Nestle Mini Nutritional Assessment ® Tool"
- "Interdisciplinary Lower Leg Ulcer Assessment Form"
- "NPUAP PUSH Tool 3.0"
- "Determining Healability Tool"

Treat the Cause
Arterial narrowing or complete occlusion

Treat Co-Factors
Nutrition, mobility, medications, lifestyle factors, underlying chronic/acute disease

Address Person’s Concerns
- "Comprehensive Assessment of Chronic Pain in Wounds"
- "WHO Pain Ladder with Pain Management Guidelines"
- "Cardiff Wound Impact (Quality of Life) Questionnaire"
- Concordance

Equate
"My Arterial Leg Ulcer" pamphlet
"The Importance of Nutrition in Wound Healing" pamphlet

Reassess
- Consider a referral to a vascular surgeon to determine if the person’s arterial flow can be improved (see "Criteria for Interdisciplinary Referrals"). Until that time, treat the wound as Maintenance/Non-healable
- If arterial flow is surgically improved, treat the wound as Healable. If the surface area has not reduced 20-30% over a 3-4 week period, reassess the ENTIRE person again
- If the person and their wound are being managed according to best practice and the wound surface area has failed to reduce in size (as expected in healable wounds), or stabilized (as expected in maintenance/non-healable wounds, consider a referral to an ET or WCS
- May need to consider adjunctive therapies, in healable wounds only

Moisture Balance and Dressing Selection
- Provide a clean, dry environment for maintenance/non-healable wounds
- Provide a moist, warm environment for healable wounds only
- Consider using the SWRWCP’s dressing selection and cleansing enablers to choose cleansing and dressing methods

Infection/Inflammation
- Assess using the "Bioburden Assessment Tool"
- Treat using the "Bacterial Burden in Chronic Wounds" chart. Consider topical antimicrobials for critically colonized wounds, and topical and systemic antimicrobials for infected wounds
- Rule out osteomyelitis

Debridement
- Do NOT debride maintenance or non-healable wounds unless you have the knowledge/skill/judgment to debride non-viable tissue for the purpose of reducing bacterial burden, drainage, and/or odor
- Debride (within your scope) non-viable tissue in healable wounds only, except stable heel ulcers covered with eschar

For more information go to: swrwoundcareprogram.ca

Last Updated: March 9, 2015