

PROCESS CHANGE/NEW KNOWLEDGE

TOPIC 1: Lymphedema Wrap (LW)

Lymphedema is a condition of localized fluid retention and tissue swelling caused by a compromised lymphatic system. Lymphedema is usually a complication of a pre-existing condition.

Lymphedema Wraps (AKA short stretch wraps or Rosidal wraps) are used to control the swelling. These wraps can only be applied by Physical Therapy (PT)/Occupational Therapy (OT). While it is an important maintenance therapy, there is not a critical time frame involved in the timing of therapy. It is okay to leave LWs off until PT/OT can see the patient.



Contraindications to LWs include active infection, acute inflammation, deep vein thrombosis or phlebitis, severe cardiac pathology, peripheral artery disease, active cancer, active heart failure, acute renal failure, connective tissue disorders, abdominal pain, sudden edema of unknown cause, acute uncontrolled hypertension.

Key points for Nursing and PT/OT when **a patient with LWs is admitted:**

- RN must remove LWs (Carefully! They can be reused!) and assess the skin for breakdown. **If breakdown is present:** follow current practice by photographing, measuring, and documenting the wound. **If patient refuses to have LWs removed:** notify the provider, document refusal in the EMR.
- RN must call provider and obtain an order for Lymphedema management, as well as wound care orders if appropriate.
- DO NOT use PT Consult order—Use the Lymphedema Management Order to appropriately notify PT/OT of the ordered treatment.
- RN will complete necessary wound care and prepare patient's legs using dermal wound spray and lotion in preparation of PT/OT visit to apply LWs.
- PT/OT will evaluate the patient for lymphedema management and determine how often to change LWs. If a patient is not a candidate for LWs, PT/OT will call the provider and notify the primary care RN.



Key points for **continuing care of the patient with LWs:**

- PT/OT will coordinate changing LWs with nursing via phone call
- Prior to PT/OT visit - the RN will remove LWs, perform skin assessment and appropriate skin/wound care.
- PT/OT will apply LWs as soon as possible after the RN has prepared the patient. It is not critical to have immediate application of LWs, therefore applications may be delayed without harm to the patient as PT/OT will prioritize assignments based on patient needs.
- **If the RN discovers skin issues/breakdown around LWs:** RN will remove LWs, follow current practice to manage skin issues as well as notify PT/OT.
- ALWAYS include LWs (presence of, removal of, delayed application, etc.) in SBAR report.
- RN will document comments regarding LWs in the EMR (*Soarian users: Body Systems and Categories—**Integ—General Integumentary—Integ Comments*)
- PT/OT will use PT/OT/ST Charting to document LWs. Nursing may review notes for further information regarding the lymphedema wrap therapy.