UNITED WOUND HEALING™

A Patient's Guide to Chronic Wound Medicine

From Healing to Prevention

To schedule an appointment call
(855) 255-1750 or visit
UnitedWoundHealing.com

Sites of care:

Hospital | Nursing Home | Assisted Living | Adult Family Home | Private Residence | Telemedicine | Clinic

We look forward to caring for you– wherever your journey takes you

It is our privilege to be entrusted with your care. We welcome the opportunity to help guide and assist you in your wound healing and recovery. Our team of specialists is highly trained, ensuring that your chronic wounds have the best opportunity to heal. We are committed to your continuity of care, and our specialists travel to different locations to ensure you have the most comfortable and successful wound care experience.

Chronic wounds are most often a result of other healthcare conditions that you may be experiencing. We are committed to working closely with your care team and primary care provider to ensure you get the best possible outcomes. The more you know about your health and medical conditions, the more quickly you will be able to recover and prevent future wounds and skin complications.

Our board-certified specialist will spend a lot of time explaining what you can expect throughout the healing process and how you can best prevent future wounds and related complications. They will also answer your questions and demonstrate key components of your care to help your recovery.

The information included in this booklet is intended to supplement the instructions of your doctor, nurses, and other healthcare professionals involved in your care.

If you have questions, please talk with your doctor, nurse or caregiver to find out what is right for you. We want to make sure you are informed and as comfortable as possible.

We welcome the privilege of serving you and assisting in your recovery.

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Wound Medicine– from healing to prevention

Hard-to-heal or "Chronic Wounds" are often caused initially by trauma or injury to the skin but fail to fully heal due to underlying medical conditions that result in slow- or non-healing wounds in the skin. Successful treatment of chronic wounds requires specialized care for both your skin and wounds, as well as careful management of the other medical conditions impacting wound healing.

Wound healing takes a team

- Primary Care Provider
- Wound Specialist (MD, DO, NP, PA)
- Specialized Nurses
- Physical and Occupational Therapy
- Dietitian and Nutritionist
- Other specialists:
  - Vascular Surgery
  - Infectious Disease
  - Podiatry
  - Endocrinology
  - Dermatology
  - Plastic Surgery

Common conditions resulting in wounds or delaying healing

- Diabetes
- Peripheral arterial disease (PAD)
- Vein disorders (ie, Varicose veins)
- Lymphedema
- Immobility
- Autoimmune disease
- Use of certain medications
- Cancer
- Multi-organ failure (heart, lungs, kidneys, liver, gut, brain, etc.)

What to expect at your wound specialist visit

Our specialists will get to know you and your care team. We will do our best to obtain a thorough understanding of your overall health as well as how and when your wounds occurred. Results of prior testing and any past treatments for your wounds will be very helpful as well. A thorough examination of your wounds as well as related body parts will help ensure the most accurate diagnosis.

On the day of your visit:

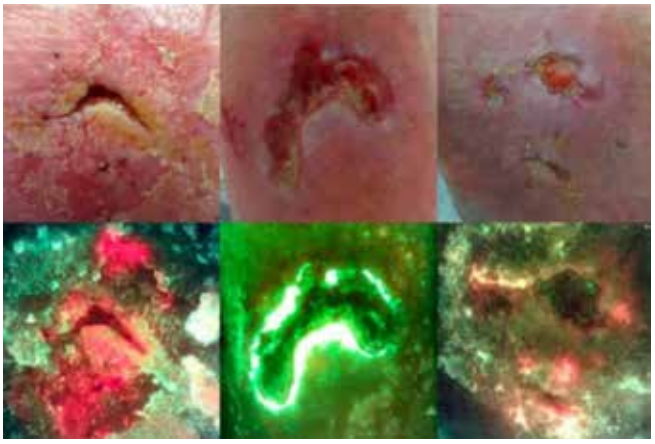
- rest and relax
- wear comfortable clothes that allow your skin and wounds to be easily examined
- provide any recent medical records or test results you may have including the medications you are currently taking.
- please have available any wound care supplies and bandages you are currently using
- if you have shoes you wear regularly, and wounds on your feet, please have these available for our specialist to assess
- eat normally and take your regularly prescribed medications as scheduled
- if you have family or a caregiver assisting in your wound care and bandage changes, please ask that they attend

The Wound Assessment:

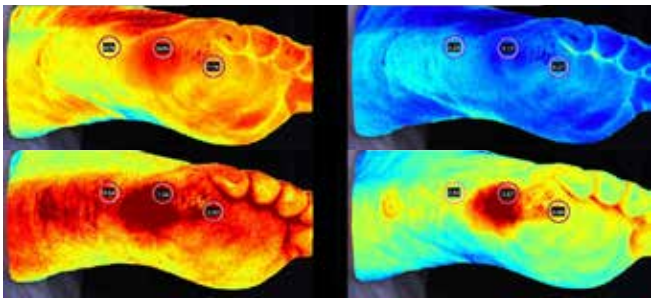
Photographs and measurements of your wound are necessary for tracking the response of treatments and progression of your wounds.

Specialized lights and cameras may also be utilized to detect the presence of higher-than-normal bacteria levels and changes to your blood flow or circulation in and around a wound.

Tissue may be removed (wound biopsy) and sent to a pathology laboratory for further analysis.



Bacterial imaging



NIRS Imaging

Pain related to your wound:

Chronic wounds commonly result in pain. Your wound specialist will evaluate the pain caused by your wounds and determine the best course of action.

During wound care and dressing changes, your specialist may utilize pain relieving/decreasing agents such as topical creams or injected drugs to reduce sensation and create numbness.

Ongoing pain management with medications may be necessary, and your wound specialist will work with your primary care provider to ensure they can prescribe the best course of treatment.

Change to Blood Flow Screening and Testing:

Your wound provider may check how well blood is moving through the arteries in your legs and feet. Two common tests included Ankle-Brachial Index (ABI) and ultrasound imaging.

These tests show if you have adequate circulation in your legs for healing. Poor circulation can cause leg pain, delay wound healing, or lead to more serious problems. Bedside vascular testing (ankle-brachial index (ABI) and toe brachial index (TBI) are simple, non-invasive tests that give your healthcare team important information to guide your wound care and determine healing opportunities from a blood flow perspective.

Treatments:

• **Wound Cleansing and Debridement:**

Keeping your wound clean, free of debris, and removing any dead tissue is critical for healing and for preventing infection. Debridement (removal) of damaged tissue, dead cells, or debris that could slow healing or increase the risk of infection is an important intervention.

After applying a topical anesthetic to keep you comfortable, your wound specialist will gently cleanse the wound. When needed, they may also use specialized instruments to carefully remove (debride) dead or infected tissue.

Post-Debridement Care Instructions	
DO	**DON'T**
Keep the dressing clean, dry, and in place.	**Don't** remove or change the dressing unless instructed.
Your wound team may change your dressing(s), or give you and your family dressing change directions. Follow these directions to keep the wound clean and prevent the wound from drying out, which slows healing.	**Don't** ignore clean dressing change techniques if you or your family are doing dress changes. Clean dressing changes are a component of preventing wound infections and supporting healing by keeping the wound moist.
Watch for signs of infection: more pain, redness, swelling, pus/drainage, or fever.	**Don't** ignore changes in your wound or wait too long to report problems
Follow up with your wound care provider as scheduled if in home health. Ensure you are available for each visit by your wound provider.	**Don't** miss or delay your wound appointments.
Eat healthy food and drink plenty of water to support your wound healing. Often an increase in protein consumption is needed to support healthy healing.	**Don't** smoke or use nicotine products as they decrease blood flow throughout the body and slow healing.

• Ultrasonic Wound Treatments:

Your specialist may prescribe an ultrasonic wound treatment to help aid in the treatment and healing of your wound. This treatment is typically performed two to three times a week for six to eight weeks for wounds not responding to basic treatments.

This procedure is typically pain-free and lasts 3 to15-minutes on average.

• Skin Substitutes:

When your body has failed to fully heal a wound in the expected time, additional therapy may be needed. Your specialist may apply a skin substitute to protect the open wound from the environment, reduce the risk of infection, and promote healing. Skin substitutes may be made from human or animal products. Please check with your specialist for more information and inform them if you have any food allergies.

What to Expect After a Skin Substitute Procedure		
STAGE	**WHAT YOU MAY FEEL OR SEE**	**HOW TO TAKE CARE**
RIGHT AFTER	The treated area may feel tender, slightly swollen, or sore. You may have a dressing (bandage) over the area.	Keep the dressing clean and dry as instructed. Avoid touching or moving the skin substitute more than needed.
OVER THE NEXT FEW DAYS TO WEEKS	You may see drainage or mild fluid under the dressing and red or somewhat warm skin. There could be small crinkling or light peeling as the new covering settles. Some discomfort with movement is normal.	Follow your provider's instructions on how often to change dressings. Avoid putting pressure on the area. If the wound is on a foot or leg, stay off it (off-load) so it can heal. Keep it elevated if swelling occurs.
MONITORING	The skin substitute integrates into the wound over time. That means new skin cells grow in, the surrounding tissue accepts the substitute, and you slowly begin to see wound shrinkage or closure. If things are going well, you should see gradual improvement. If not, there may be concerns about infection or poor integration of the skin substitute.	You will have follow-up visits so your provider can check healing progress. Keep up any other treatments you were doing (dressing changes as directed by the provider, good nutrition with added protein, if needed, controlling blood glucose/sugar if diabetes a factor.
WHAT TO AVOID	Avoid activities that stretch, pull, or disturb the skin substitute. Also avoid getting the area wet (if instructed) or exposing it to sun or harsh chemicals. **Smoking or using nicotine products will impede healing!**	Avoid strenuous exercise, bending or stretching the skin substitute area until cleared by your wound provider. Follow instructions about bathing/showering carefully. Do not use harsh cleaning agents on or near the skin substitute.

• Compression Therapy:

Swelling (edema) in the legs and feet specifically, or anywhere else in the body, can slow down healing or cause new wounds. Your wound specialist will check for swelling and may recommend compression as part of your treatment.

Compression works by gently squeezing the legs, arms or trunk, depending on where the edema is located, to improve blood flow and move harmful fluids out of the tissues. This helps wounds heal and lowers the chance of new wounds forming.

Types of compression include:

- **Bandages and wraps** – used to reduce swelling and help wounds heal.
- **Compression garments** (like stockings or sleeves) – often worn long-term to keep swelling down.
- **Compression pumps** – inflatable sleeves that provide pressure, usually used at home or in a facility under a provider's guidance.

Compression is safe and effective when prescribed by your healthcare provider and is often a lifelong tool for people with chronic swelling.

• Electrical Stimulation Therapy:

Electrical stimulation is a safe treatment that uses gentle, controlled electrical currents placed on the skin around a wound. This therapy helps "wake up" the body's natural healing process by improving blood flow, reducing swelling, and encouraging new tissue growth. Your wound specialist may recommend it when wounds are slow to heal.

• Negative Pressure Wound Therapy (NPWT)

Negative pressure wound therapy, sometimes called a "wound vac," is a treatment that uses gentle suction to help wounds heal. A special dressing is placed over the wound and connected to a small pump that creates a vacuum seal. This light suction removes extra fluids and bacteria, reduces swelling, improves blood flow, and helps pull the edges of the wound together. The system is usually portable, so you can move around while wearing it. Your wound specialist will teach you how negative pressure wound therapy works and check your wound regularly to make sure it is healing properly.

Follow up visits:

Your specialist will help you determine how frequently your wound should be reevaluated. Typically, wound dressings are changed every two or three days depending on the characteristics of your wound and how it responds to treatment.

Your wound specialist usually assesses your wound once a week, sometimes more often, if needed.

Discharge Information and next steps

Discharging from a hospital

After hospitalization, it is important to have close follow up with a skin and wound specialist. Often further wound care and rehabilitation is necessary, and the team at United Wound Healing can help guide your care while in the nursing home. If you are discharged home from the hospital, a visit from a specialist can help ensure your healing and recovery continues. When additional care is needed, we can assist you in establishing care at a local wound care center.

Discharging from a nursing home

Once you are ready to return home, or to another location of care such as an adult family home or assisted living, a United Wound Healing specialist can provide virtual and in person care wherever you go. This is critical to reduce the risk of complications and avoid the need to return to the hospital.

Chronic Wound and Amputation Prevention Program

United Wound Healing's Chronic Wound and Amputation Prevention Program is a unique and specialized chronic care management program aimed at keeping you healthy. Over 60 percent of chronic wounds will return in the first year, and often can result in amputations of toes and limbs. Patients of United Wound Healing have the option to enroll in these services which include regular communications with our team and daily monitoring by our care coordinators. We will help you get the care needed to reduce the risk of more wounds and amputations.

Participate in your health and safety

Tobacco and Wound Healing

Using tobacco and/or nicotine—whether smoking, vaping, or chewing—makes it harder for your body to heal. All wound types, no matter what caused the wound, must have sufficient oxygen to heal. Nicotine causes constriction of blood vessels, so less blood and oxygen reach the wound. At the same time, carbon monoxide from cigarette smoke takes the place of oxygen on the red blood cells, leaving tissues "hungry" for the oxygen they need to repair. This double hit from smoking nicotine causes wounds in people who use tobacco to heal more slowly and creates a higher risk of infection. Additionally, the new tissue may not be as strong as it should be due to lack of enough oxygen to create strong scar tissue. Chewing tobacco and nicotine pouches have the same harmful effect (constriction of the blood vessels) which can delay wound closure due to decreased blood flow to the wounded area.

The Importance of Nutrition in Wound Healing

What you eat plays a big role in how well and how quickly your body heals. When you have a wound, your body works extra hard to repair damaged skin and fight infection. To do this, it needs the right "building blocks" from food—like protein, vitamins, and minerals. Eating the right foods gives your body energy and nutrients to close wounds, while certain foods can slow healing or make swelling and infection more likely. The chart below shows which foods can help your wounds heal and which foods are better to limit or avoid. This is a general list and is not comprehensive for all nutritional guidelines.

Foods to Eat (Help Healing)	Foods to Avoid or Limit (Hinder Healing)
Protein-rich foods: lean meats, poultry, fish, eggs, beans, lentils, tofu, Greek yogurt, cottage cheese	**Sugary foods:** candy, cakes, cookies, soda, sweetened drinks
Vitamin C sources: oranges, strawberries, kiwi, bell peppers, tomatoes, broccoli	**Refined carbs:** white bread, pastries, chips, processed snack foods
Vitamin A & beta-carotene: carrots, sweet potatoes, spinach, kale, pumpkin	**Highly processed/fried foods:** fast food, fried meats, packaged snack foods
Iron-rich foods: red meat & poultry, seafood, beans and legumes, green leafy vegetables, nuts	**Salty foods:** processed meats (bacon, deli meats, sausage), canned soups, salty snacks
Zinc-rich foods: beef, chicken, seafood (oysters, crab), nuts, seeds, whole grains	**Excess/ alcohol:** beer, wine, liquor (slows immune response and tissue repair)
Healthy fats (Omega-3s): salmon, tuna, walnuts, flaxseed, chia seeds, olive oil	**Excess/ caffeine or alcohol:** may dehydrate and reduce healing efficiency
Hydration: water, herbal tea, milk, clear broths	

Support Surfaces for Wound Healing

What are support surfaces?

When you spend a lot of time in bed or sitting, constant pressure on the skin decreases blood flow where your skin is pressing on the bed or chair. This pressure can slow healing or cause new wounds. Support surfaces do not replace other parts of care, like good nutrition or changing positions, but they can make a big difference in preventing and healing wounds. They are designed to spread out pressure on the skin, reduce the risk of new wounds, and help existing wounds heal. Unlike a regular hospital mattress or chair cushion, these surfaces are made to protect the skin by redistributing pressure to keep blood moving to areas that are at risk for breakdown from immobility.

Support surfaces help by:

- **Redistributing pressure** so no single spot carries all the weight.
- **Reducing shear and friction,** which are forces that pull or rub the skin, increasing the risk of wounds.
- **Managing heat and moisture,** keeping skin cooler and drier to lower the risk of breakdown.

Types of support surfaces:

- **Bed surfaces** – Special foam, air, gel, or fluid mattresses that reduce pressure. Some are powered and can adjust automatically, while others are non-powered but designed to support the body better than standard mattresses.
- **Chair cushions** – Special cushions for wheelchairs or recliners that help spread or distribute pressure when sitting for long periods.

Support surfaces *with* other care

Support surfaces work best when combined with other care—such as **regular repositioning, good nutrition, skin care, and relieving pressure on the heels and other bony areas of the body.**

Bed vs. Chair Support Surfaces

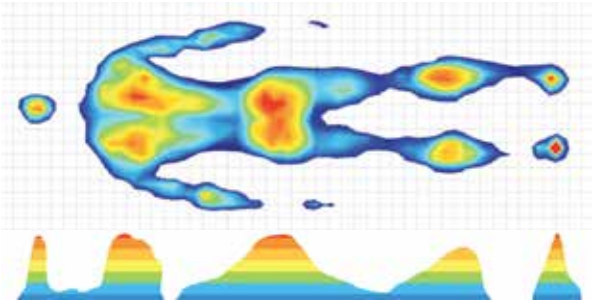
BED SUPPORT SURFACES

Foam mattresses: Better than standard mattresses for spreading out pressure.

Gel or fluid mattresses: Spread weight evenly and reduce heat buildup.

Air mattresses: Adjust pressure levels and help keep skin cooler and drier.

Specialty beds: May alternate pressure or provide constant airflow to protect skin. Also, oversized or bariatric specialty mattresses are available for larger patients.



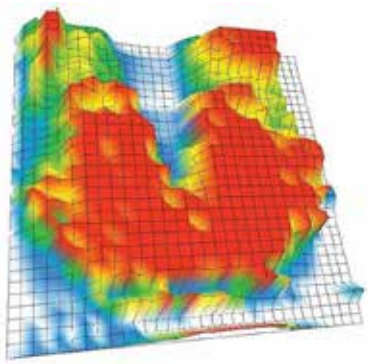
CHAIR SUPPORT SURFACES

Foam cushions: Improve comfort and reduce pressure when sitting.

Gel cushions: Spread weight and lower the risk of wounds.

Air cushions: Distribute pressure and can be adjusted for comfort.

Specialty wheelchair cushions: Designed for long-term sitting support and pressure protection.



Common Methods for Offloading the Diabetic Foot

When someone has diabetes, wounds on the feet (often called diabetic foot ulcers) are harder to heal because of poor circulation, nerve damage (neuropathy), or repeated pressure from walking. One of the most important steps in healing these wounds is "offloading." Offloading means taking pressure off the wound so the skin and tissue can repair. Without offloading, wounds usually stay open or get worse.

Common Methods for Offloading the Diabetic Foot	
OFFLOADING METHOD / DEVICE	**HOW IT HELPS / WHAT IT DOES**
Total Contact Cast (TCC)	A cast that fits the foot and lower leg snugly. It spreads pressure over the whole surface and keeps you from "cheating" by walking unevenly. Often considered a "gold standard" for ulcers.
Removable Cast Walker / Boot	A boot you can take off for cleaning, but should wear most of the time. It protects the wound area and takes weight off the sore spot.
Orthotic Inserts / Custom Insoles	Inserts placed inside shoes to shift pressure away from the ulcerated area, giving it space to heal.
Therapeutic / Offloading Shoes	Shoes designed to reduce pressure on high-risk areas (e.g. extra depth, softer soles, special design).
Heel Relief Shoes / Sandals	Shoes or sandals that redirect weight away from the heel toward the mid-foot reduce stress on the heel wound after surgery or during wound healing.
Wheelchair, Crutches, or Walker	Devices that help you reduce or eliminate pressure on the injured foot by transferring weight to other limb or assistive devices.

Activity/Mobility/Exercise – Movement and Wound Healing

Movement is one of the best tools to prevent wounds and help them heal. Different kinds of movement play different roles: activity, mobility, and exercise. All three improve blood flow, lower pressure on the skin, and sends more blood with oxygen to the tissues to repair wounds.

- **Activity**
  The overall movement you do during the day—like walking to the bathroom, standing, or light chores. Activity breaks up long periods of sitting or lying in one spot, reduces constant pressure, and lowers the risk of new wounds.
- **Mobility**
  Your ability to change position—like turning in bed, shifting in a chair, or standiup. Mobility prevents skin breakdown by relieving pressure, reducing friction and shear, and keeping blood moving to at-risk areas.
- **Exercise**
  Planned, purposeful movement—like walking programs, foot/leg exercises, or light strength work. Exercise boosts circulation and oxygen delivery, strengthens tissues, and can improve diabetes control—all supporting wound healing.

Showering & Bathing with an Open Wound: What You Should Know

You can often still shower with an open wound, but you need to be careful so you don't harm the healing tissue or introduce infection. Avoid taking baths or soaking the wound because prolonged water exposure can soften the skin, swell the tissue, and increase the risk of infection.

Tips & Precautions

- **Choose showers over baths**
  Water in showers runs off the body; baths or tubs submerge the wound and maintain constant moisture.
- **Cover when possible**
  Use waterproof dressings, a plastic bag, or a protective barrier to shield the wound from the water flow.
- **Gentle cleansing**
  Use mild, unscented soap and lukewarm water to clean gently around the wound. Rinse away soap—don't scrub the wound itself.
- **Avoid strong water pressure**
  Don't let the shower stream hit the wound directly with force—that can damage new tissue or loosen dressings.
- **Pat dry gently**
  After showering, use a clean, soft towel to pat the area dry—avoid rubbing. Then reapply a fresh dressing as your provider instructed.
- **Don't soak or swim**
  Avoid tubs, swimming pools, hot tubs, or long baths until your wound is fully healed and your provider says it's safe.

Basic Skin and Foot/Nail Care

Using daily moisturizing creams and ointments may be recommended by your skin and wound care specialist. These products restore the barrier function of the skin and keep it healthy, reducing the risk of new wounds and infections.

Daily inspection of your feet, toes, and nails is also important for preventing wounds. A mirror can be placed under your foot to help you see it better. Thick calluses are often the first step before a foot wound develops and may require trimming from a specialist. Nails should be also trimmed carefully by a specialist to avoid infection and further wounds.

Monitoring your wound for infection

Monitoring your wound for an infection is important for your overall care. Infections are dangerous and can cause more tissue destruction, limb loss, and in some cases, death.

Common symptoms include:

- Redness and increased pain around the wound
- Increased drainage or a change in the drainage color to a cloudy/darker or green color
- Fever
- Foul or strong odor from wound
- Difficult-to-control blood sugar/glucose levels
- Increased confusion or mental changes to common symptoms
- Change in activity level or fatigue

If you notice any wound infection symptoms, call your doctor immediately.

Definitions of Wound Care Terms

- **ABI (Ankle-Brachial Index)** – A simple test that compares blood pressure in your ankle and arm to see how well blood is flowing to your legs and feet.
- **Amputation** – Surgical removal of part of the body, such as a toe, foot, or leg, usually when there is severe damage or poor circulation.
- **Anesthetic Agents** – Medicines that numb an area, so you don't feel pain during a procedure.
- **Blood Glucose** – The level of sugar (glucose) in your blood, which affects healing—especially important in people with diabetes.
- **Chronic Wound** – A wound that has not healed after several weeks or months and needs special care.
- **Compression Garments** – Stockings or sleeves worn daily to keep swelling down and improve circulation.
- **Compression Pumps** – A machine that gently squeezes the limb with air-filled sleeves to move fluid and reduce swelling.

References:

1. Chiang YH, Lee KY, et al. *Smoking increases the risk of postoperative wound complications, including surgical site infection and wound disruption.* Int Wound J. 2023. Wiley Online Library
2. Seth I, Goyal A, et al. *Impact of nutrition on skin wound healing and aesthetic outcomes: the role of smoking in reduced tissue oxygenation and cellular function.* Frontiers in Medicine. 2024. PMC
3. Heikkinen J, et al. *Cigarette smoke and nicotine effects on human mesenchymal stem cells (MSCs) relevant to wound healing and regeneration.* PMC (2024). PMC
4. Sterling J, Policastro C, et al. *How and why tobacco use affects reconstructive surgical practice: a contemporary narrative review.* Transl Androl Urol. 2023. Translational Andrology and Urology
5. Seth I, et al. *Impact of nutrition on skin wound healing.* Front Med. 2024.
6. Alberta Health Services. *Eating Well for Wound Healing.* 2023.
7. Temple Health. *6 Tips for Good Nutrition After Surgery.* 2023.
8. **Li et al. (2023)** — *Total Contact Casts versus Removable Offloading Interventions for the Treatment of Diabetic Foot Ulcers: a Systematic Review and Meta-Analysis*
   This meta-analysis found that using non-removable casts (TCCs) leads to higher healing rates and faster healing compared to removable walkers or therapeutic footwear. Frontiers+2PMC+2
9. **Best Practice Review (Lazzarini et al., 2025)** — *Best Practice Offloading Treatments for Diabetic Foot Ulcer Healing*
   A contemporary review of offloading strategies, including casting, walkers, and footwear. ScienceDirect
10. **"Offloading in Diabetic Foot Ulcers: A Comprehensive Review" (2025, Sharma et al.)**
    Explores various offloading methods, their biomechanical rationale, and evidence for use in clinical practice. SpringerLink
11. **"Offloading devices for neuropathic foot ulcers in adult persons with type 1 or type 2 diabetes: a rapid review with meta-analysis and trial sequential analysis" (Okoli et al., 2022)**
    Summarizes evidence for offloading devices in neuropathic diabetic feet. PubMed

- **Compression Wraps** – Bandages wrapped around the leg or arm to gently squeeze and reduce swelling.
- **Edema** – Swelling caused by extra fluid trapped in the body's tissues, often in the legs or feet.
- **Informed Consent** – When your provider explains a treatment, including benefits and risks, and you agree to it.
- **Lymphedema** – Long-term swelling caused by a buildup of lymph fluid when the body's drainage system is not working properly.
- **PAD (Peripheral Artery Disease)** – A condition where blood vessels in the legs become narrow or blocked, reducing blood flow and slowing healing.
- **Pain Scale** – A tool to describe how much pain you have, often by choosing a number from 0 (no pain) to 10 (worst pain).
- **Skin Substitute** – A medical covering made from natural or man-made materials that helps protect the wound and support healing when skin is damaged.
- **UltraMist** – A special type of ultrasound therapy that uses a gentle mist and sound waves to clean and help wounds heal.
- **Wound Biopsy** – A small sample of wound tissue taken by your provider to check for infection, cancer, or other causes of poor healing.
- **Wound Debridement** – A treatment where a provider carefully removes dead or unhealthy tissue so the wound can heal better.
- **Wound Dressings** – Special coverings placed over a wound to protect it, keep it clean, and help it heal.

12. **"The Efficacy of Custom-Made Offloading Devices for Diabetic Foot Ulcers" (Jones et al., 2024)**
This paper supports that custom-made devices may outperform standard ones in reducing ulcer risk and promoting healing. BioMed Central
13. **"Improving Offloading for the Foot in Diabetes: Use of Total Contact Casting in Practice" (Wounds UK consensus, Bus et al., ~2023)**
Highlights TCC as the "gold-standard" non-removable offloading device and discusses barriers to its use. Wounds UK
14. International Guideline (NPIAP/EPUAP/PPPIA). Repositioning recommendations and support-surface principles, 2025. International Guideline+1
15. Avsar P, et al. *Repositioning for preventing pressure ulcers: systematic review.* 2020. PubMed
16. Gillespie BM, et al. *Repositioning for pressure injury prevention in adults.* 2021. ScienceDirect
17. Chaboyer W, et al. *Effect of pressure-injury prevention care bundles: systematic review & meta-analysis.* 2024. ScienceDirect
18. Demir AS, et al. *Care bundles for preventing hospital-acquired pressure injuries: review.* 2025. PMC
19. Ahmad AM, et al. *Effect of Buerger–Allen exercise on wound healing in DFU: RCT. J Wound Care,* 2024. PubMed
20. Baker CJ, et al. *Systematic review of glycemia, fitness, and wound healing (diabetes).* 2025. ScienceDirect
21. StatPearls. *Physiology, Wound Healing* (oxygenation/perfusion), updated 2025. NCBI
22. Robinson GL, et al. *Home-based exercise to increase mobility in wound patients: pilot protocol.* 2025.
23. King's College Hospital NHS Foundation Trust. *How to care for your wound at home.* 2023. Available at: kch.nhs.uk
24. Alberta Health Services. *Open Wound: Care Instructions.* 2022. Available at: myhealth.alberta.ca
25. WoundReference. *Patient Education: Shower Instructions for People with Wounds.* 2024. Available at: woundreference.com
26. Cleveland Clinic. *Incision Care.* 2024. Available at: my.clevelandclinic.org
27. Atlanta North Dermatology. *Wound Care FAQs.* 2023. Available at: atlantanorthdermatology.com

LEAP UP: A structured, 5-step management program for teams focused on Lower Extremity Amputation Prevention (LEAP) and general Ulcer Prevention (UP), integrated with key wound and skin care protocols:

1. Initial screening; 2. Education; 3. Daily inspection;
4. Footwear and offloading; 5. Management of common issues

UNITED WOUND HEALING™

We are on a mission to heal wounds and skin-related diseases because we want to make sure these conditions never come back. Access to specialists trained to treat complex skin conditions is often the primary barrier to successful skin and wound healing. United Wound Healing has a team of specialists who have dedicated their careers to treating the most both simple and complex skin conditions.

To schedule an appointment call
(855) 255-1750
Or visit
UnitedWoundHealing.com