

Helping You Heal: Your Guide to Wound Care

# Venous Leg Ulcers



### The Program

This booklet will help you:

- Manage your wound at home,
- Improve and maintain your health and quality of life,
- Prevent new wounds.

You can use this booklet and the accompanying passport to:

- Keep track of information about your care,
- Guide your day-to-day wound care,
- Know when you need to call your care team,
- Ensure that your wound is being managed in the best way possible.

Your team looks forward to working with YOU to Heal/Take Control of Your Wound.



You have developed some personal goals, and your passport is your tool to keeping track of them, and your care, as you begin managing your wound at home.

To heal your wound you will need to take care of yourself and pay attention to your body, but it does not mean you need to stop doing the things you love to do. This booklet is here to help you!

Keep this booklet and your passport nearby, in a convenient spot, so you can refer to them and make notes about your healing journey. It helps to know a bit more about your particular wound.

### **Venous leg ulcers**

You have a venous leg ulcer, which is caused by a wound that cannot heal properly because of poor circulation in the lower legs.

Veins move blood from the feet and lower legs "uphill" to the heart. If your circulation is impaired for any reason, pooling of blood around the lower part of the leg to just below the ankle may occur. This pooling can cause swelling, thickening and damage to the skin, as well as difficulty in healing in a normal way if a wound, even a bump or bruise, occurs.

Please review the following reasons why you may develop an ulcer:

- Family history of venous disease
- Impaired circulation
- Reflux of blood through the venous valves (valves in your veins that keep blood flowing in one direction)
- Deep vein thrombosis may cause blockages in the veins
- Obesity
- Impaired pumping of the calf muscle due to decreasing lower leg movements sedentary lifestyle, prolonged standing, reduced mobility
- Multiple Pregnancies causes pressure on the veins in the lower legs
- Leg trauma causing damage to walls of valves in the veins



### **Managing Your Ulcer**

Knowing what caused your venous ulcer will help you manage your wound and prevent future venous ulcer from forming. In order to be YOUR healthiest, you should:



1. Exercise daily. Walking strengthens and exercises your calf muscles, causing an increase in the pumping of blood in your legs. Your nurse may put you on a graduated walking program.



2. Check your feet and legs daily for signs of ulcers. Wear compression stockings. Keep skin on the legs clean and moisturized. Avoid extremes in temperature.



3. **Keeping your legs up** higher than your heart (example put your feet up on pillows when lying in bed or on the couch) for at least 20 minutes three times a day (morning, afternoon and evening to help swelling down. Don't cross legs when sitting.



**4. Protect your legs from bumps or scrapes** by padding sharp corners on furniture, and not engaging in activities that could cause injury to legs.



**5. Eat a balanced diet**, high in protein, which keeps your skin strong and helps wounds heal.



**6. If you smoke, QUIT!** It's bad for blood flow, your skin, and your body. Your team will talk to you about options that will help you kick the habit! It's truly one of the best things you can do for your body at any age.



7. **Compression**, wraps and garments are necessary for venous leg ulcer healing. Advanced dressings are likely not enough on their own. This helps bring blood from your legs back to your heart to bring down swelling that keeps your wound open. Compression garments will need to be worn daily even after wounds are closed (healed) to prevent swelling and occurrence of new wounds.

### **Caring For Your Wound**

Here are the steps you'll need to take to properly care for your wound

### **Prepare**

Get your supplies together and clean a work surface with plenty of room

### **Wash Hands**

- Remove all jewelry and point hands down, under warm water
- Add soap and wash for 15 to 30 seconds, cleaning under your nails
- Rinse and dry well with a clean towel

### **Removing Dressing**

- Carefully loosen the dressing, and pull off gently
- If the dressing sticks, wet the area
- Put old dressing in a plastic bag, and set aside
- Wash your hands AGAIN

### Inspect

Inspect wound for any drainage, redness, pain or swelling.

### **Clean Wound**

- Fill the syringe with recommended fluid.
- Hold 1 to 6 inches away from the wound and spray gently.
- Use soft, dry cloth or piece of gauze to pat the wound dry.
- Shower as directed.

### **Apply Dressing**

Place and secure the clean dressing onto your wound

#### **Finish**

- Apply compression if directed by your nurse
- Throw used supplies into waterproof, tightly closed, double plastic bag
- Wash your hands AGAIN
- Wash any soiled laundry separately

### Remember, use a dressing only ONCE and never reuse.

### **Signs of Trouble**

Your wound will change throughout the healing process. Changing your dressing gives you a chance to take a closer look at your wound.

Call your nurse if you see the following changes:

- More redness, pain, swelling or bleeding
- The wound is larger or deeper
- The wound looks dried out or dark
- The drainage coming from the wound is increasing
- The drainage coming from the wound becomes thick, tan, green or yellow, or smells bad (pus)
- Your temperature is above 100 °F (37.8 °C) for more than 2 hours

### **My Dressing Change**

Keep the following list handy and use it to help you remember the types of dressings you will use for your wound and when to change your dressings.

I remove my dressing with:	
I clean my wound:	
The 1st dressing I apply:	
The 2nd dressing I apply:	
The 3rd dressing I apply:	
I change my dressings (how often):	
I will call my nurse:	
If my dressing leaks:	

### **Managing Your Wound**

Here are a few scenarios that will help you to judge how your healing is progressing:

### Your wound is healthy

Your wound looks very similar to the last dressing change. There is no redness, inflammation, pain, bleeding and the discharge looks the same. Your wound may look smaller and the discharge may be less and your swelling may be reduced.

# Your wound may be in trouble, call your nurse. If you experience changes in color, numbness, tingling, or pain with compression remove it until you are able to talk with your nurse

Your wound looks larger or deeper. There is some redness or the color of your foot is different, it feels warmer and it looks swollen. There is no bleeding but the discharge is different, or there is more than usual. If you are wearing compression you begin experiencing numbness, tingling or new pain.

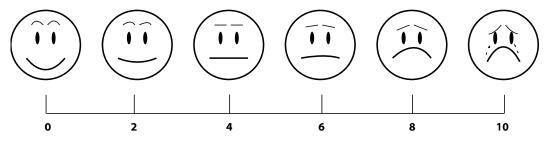
### Call your nurse or follow up with your primary care provider. If there is an emergency, call 911

Your wound looks much larger or deeper. There is redness, swelling and bleeding that isn't stopping. The discharge is very different or there is much more of it. You have pain and a fever.

### **Daily Activities**

Please note the following daily activities:

- Check your dressing daily. Ensure your dressing is dry and stable. Check to see if a dressing change is required.
- Inspect your skin and body.
- Assess your wound for any changes daily or with each dressing change.
- Eat three meals a day based on Canada's Food Guide.
- Assess how you generally feel today.
- Follow your exercise plan.
- Assess your pain level. The scale below may help you to assess your pain level. You may review this with your nurse at appointments.



### **Red Flags**

## If you experience any of these, call 911 or go to the emergency room immediately!

- Your temperature is above 100 °F (37.8 °C) for more than 4 hours
- You have difficulty breathing
- You feel confused
- You have fever, chills, or light-headedness
- Your wound is bleeding and does NOT stop

### **Contact Information**

Use this worksheet to record important numbers and information while you manage your wound at home.

My Nurse's Name:	 	 	 	
Cell Phone No.:		 	 	
Office Number:		 	 	
My Care Coordinator:	 	 	 	
Cell Phone No.:		 	 	
Office Number:		 	 	
My Physician:	 	 	 	
Cell Phone No.:	 	 	 	
Office Number:		 	 	



### **Contact Us**

If you have any questions regarding this service, please contact: 310-2222 • ontariohealthathome.ca

Ontario Health at Home has many community offices in the North East to serve you, including:

### **Kirkland Lake**

53 Government Road West Kirkland Lake ON P2N 2E5 Telephone: 705-567-2222 Toll free: 1-888-602-2222

### **North Bay**

1164 Devonshire Ave. North Bay ON P1B 6X7 Telephone: 705-476-2222 Toll free: 1-888-533-2222

### **Parry Sound**

6 Albert St.
Parry Sound ON P2A 3A4
Toll free: 1-800-440-6762

### Sault Ste. Marie

390 Bay Street, Suite 103 Sault Ste. Marie ON P6A 1X2 Telephone: 705-949-1650 Toll free: 1-800-668-7705

### **Sudbury**

40 Elm St, Suite 41-C Sudbury ON P3C 1S8 Telephone: 705-522-3461 Toll free: 1-800-461-2919

TTY: 711

(ask operator for 1-888-533-2222)

### **Timmins**

330 Second Avenue, Suite 101 Timmins ON P4N 8A4

Telephone: 705-267-7766 Toll free: 1-888-668-2222

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For information and referrals related to home and community care or to learn more about long-term care home placement services, please call 310-2222. No area code is required.

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