

## Wound Care in Long-Term Acute Care A Guide for Patients & Families

## LTACH Wound Care Program

Welcome to Bridgepoint's Wound Care Program. This handout will help you and your family understand what a Long-Term Acute Care Hospital (LTACH) is, how wound care at an LTACH differs from a Skilled Nursing Facility (SNF), and what to expect during your stay at Bridgepoint.

### What is an LTACH?

Long-Term Acute Care Hospital (LTACH) is a specialized hospital for patients who need extended medical and nursing care for serious or complex medical conditions. Unlike a regular hospital, an LTACH focuses on longer recovery periods while providing hospital-level intensity of care.

### Types of Wounds We Treat

At Bridgepoint our wound care team is equipped to manage many types of complex wounds, including:

| Wound Type                                            | Common Causes                             | Why LTACH Level Care                                                     |
|-------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------|
| <b>Pressure Injuries (Stage 3, 4 and unstageable)</b> | Prolonged bed rest, limited mobility      | Deep tissue damage, infection risk, surgical wound closure may be needed |
| <b>Diabetic Foot Ulcers</b>                           | Diabetes, poor circulation, nerve damage  | Vascular complications, osteomyelitis risk, specialized debridement      |
| <b>Venous/Arterial Ulcers</b>                         | Vascular disease, poor blood flow         | Complex compression therapy, vascular monitoring                         |
| <b>Post-Surgical Wounds</b>                           | Surgery, wound dehiscence                 | IV antibiotics, wound VAC therapy, surgical follow-up                    |
| <b>Infected/Non-Healing Wounds</b>                    | Bacteria, poor nutrition, chronic illness | IV therapy, advanced dressings, nutritional support                      |
| <b>Burns &amp; Skin Grafts</b>                        | Burns, skin graft sites                   | Graft monitoring, pain management, PT/OT                                 |

## Your Wound Care Team

At Bridgepoint, you benefit from a multidisciplinary team working together on your wound care plan. This team includes but is not limited to the following members.

| LTACH Team Members                | Their Role in Your Wound Care                                 |
|-----------------------------------|---------------------------------------------------------------|
| Wound Care Physician / Surgeon    | Oversees complex wound treatment plan, performs procedures    |
| Certified Wound Care Nurse (CWCN) | Specialized dressing changes, wound assessments daily         |
| Registered Nurse (RN)             | 24/7 monitoring, medication administration, daily care        |
| Registered Dietitian              | Nutrition optimization for wound healing (protein, vitamins)  |
| Physical Therapist (PT)           | Mobility, pressure relief, circulation improvement            |
| Occupational Therapist (OT)       | Adaptive techniques to protect wounds during daily activities |
| Infectious Disease Specialist     | Management of infected wounds, antibiotic selection           |
| Social Worker / Case Manager      | Discharge planning, family education, insurance coordination  |

## Wound Care Treatments at LTACH

Once admitted to Bridgepoint, our team will assess any wounds you admitted to the hospital with. This initial assessment can include counting the number of wounds and where they are located on your body, measuring the wounds' size and depth and taking pictures. The team will then develop a personalized plan for recovery and healing which may include one or more of the following treatments:

### Surgical Care

- Both DC locations offer surgical debridement and grafts to assist with wound healing and closure. Onsite plastic surgeons work hand in hand with our wound care team to develop the treatment plan that is right for you and provide surgical care as indicated.

### Advanced Dressings & Therapies

- Negative Pressure Wound Therapy (NPWT / Wound VAC) — a device that uses gentle suction to remove fluid, reduce swelling, and promote healing
- Bioactive dressings — silver-based, collagen, or foam dressings that fight infection and support new tissue growth
- Enzymatic debridement — special gels that dissolve dead tissue without surgery
- Surgical debridement — removal of dead tissue in a procedure room or operating room
- Compression therapy — for venous ulcers to improve blood flow back to the heart

### Infection Control & IV Therapy

- Blood cultures and wound cultures to identify infection type
- IV antibiotics administered directly through a PICC line or IV catheter
- Isolation precautions if multi-drug-resistant organisms (MRSA, VRE) are present
- Regular lab monitoring of infection markers (CBC, CRP, procalcitonin, wound cultures)

## Nutrition Support for Wound Healing

Nutrition is critical for wound healing. Your dietitian will assess when appropriate and optimize:

- Protein intake — essential for tissue repair and immune function
- Vitamin C and Zinc — key micronutrients for collagen production
- Caloric needs — adequate calories prevent muscle breakdown
- Hydration — proper fluid balance supports cell function
- Enteral nutrition (tube feeds) or TPN if oral intake is insufficient

## LTACH vs. SNF: Choosing the Right Level of Care

The decision to place a patient in an LTACH vs. SNF is based on the complexity of the wound and the patient's overall medical condition. Here is a general guide:

| Clinical Need                        | LTACH               | SNF                                        |
|--------------------------------------|---------------------|--------------------------------------------|
| Stage 3–4 Pressure Injury            | ✓ Preferred         | Limited                                    |
| Simple Stage 2 Wound                 | Can manage          | ✓ Appropriate                              |
| Wound VAC / NPWT needed              | ✓ Preferred         | Limited availability                       |
| IV antibiotics for wound infection   | ✓ Full capability   | Dependent on number of type of antibiotics |
| Surgical debridement needed          | ✓ Available on-site | Transfer required                          |
| Daily wound assessment by specialist | ✓ Daily             | 1–2x/week typically                        |
| Ventilator + wound care              | ✓ Available         | Limited                                    |
| Nutritional support (TPN/tube feeds) | ✓ Full support      | Limited                                    |
| Multiple co-morbidities + wounds     | ✓ Full support      | May not be equipped depending on location  |

## Warning Signs — When to Alert Your Nurse

### URGENT

Notify your nurse IMMEDIATELY if you notice any of the following changes in your wound:

- Increased redness, swelling, or warmth around the wound
- New or worsening pain at the wound site
- Foul odor or change in drainage color (yellow, green, brown)
- Fever (temperature above 101°F / 38.3°C)
- Wound edges pulling apart (dehiscence)
- Black or darkened tissue appearing in or around the wound
- Sudden increase in wound drainage or bleeding
- Red streaking spreading away from the wound

## How Family Members Can Help Your Nurse

Family involvement plays an important role in wound healing. Here is how you can support your loved one:

- Encourage adequate nutrition and hydration. Discuss with the team any dietary restrictions and how to support nutritional needs.
- Remind your loved one to change positions regularly to reduce pressure on wounds
- Do not touch, remove, or change dressings unless specifically trained and instructed to do so
- Notify nursing staff if you notice any warning signs listed above
- Keep skin clean and dry during visits and help with hand hygiene and repositioning when appropriate.
- Ask to receive wound care education sessions as offered by your care team.
- Supporting emotional well-being is important. Wound healing can be a long process.
- Coordinate with the case manager on discharge planning and any future wound care needs at your next level of care be it a skilled nursing facility, assisted living facility or home.

## Preparing for Discharge

Many of our LTACH patients will be discharged to a skilled nursing facility for ongoing care before returning home. Be sure to work closely with case management to ensure that the skilled nursing facility you discharge to can support your type of wound healing. Before you leave Bridgepoint, your care team will make sure you and your family are confident and prepared. Discharge education will include:

- Step-by-step wound dressing instructions (with return demonstration if going home)
- Signs and symptoms of infection to watch for
- Wound supply list and where to obtain supplies
- Follow-up appointments with your wound care provider or surgeon
- Skilled Nursing Facility or Home health nursing referrals
- Written wound care instructions in plain language