	v Patient Date:
Additional Comments:	ablished Patient Provider:
Is this wound healable: \[Yes \] No Wound #: Location: Pre- Post- Assessed Stage of Wound: 1 2 3 4	Is this wound healable: Yes No Wound #: Location: Pre- Post- L
Tissue Involvement/Uncovered: Superficial Fascia Fat Muscle/Tendon Superior Periosteum Bone Other: 9	Tissue Involvement/Uncovered: Undermining: Superior Superior
Debridement Report: Probe to Bone □ Yes □ No Debridement Level: I II III IV AgNO₃ Cautery Instrument: Blade Curette Scissors Nippers Forceps/Tweezers Tissue Removed: Skin Fascia Fat Capsule Slough/Eschar/Necrosis Hypergranulation Muscle/Tendon Bone Hemostasis: EBL CC None Minimal Pressure □ Gelfoam □ Thrombin Pain: pre- /10 during Tx- /10 post- /10 Anesthesia: Pre-medicated Topical Injection None Continue Debridement: □ Yes □ No □ Wound Closed Rationale for Continued Debridement of this wound Healable: □ Maintain the wound in the active/acute phase of healing □ Clinically, the wound is improving with continuing care, incl. regular surgical debridements. □ The wound is not amenable to self-care or homecare. Non-healable: □ Continuing care with palliation goals (see above) □ Remove necrotic, non-vital and infected tissue from the wound.	Debridement Report: Probe to Bone □ Yes □ No Debridement Level: I II III IV AgNO₃ Cautery Instrument: Blade Curette Scissors Nippers Forceps/Tweezers Tissue Removed: Skin Fascia Fat Capsule Slough/Eschar/Necrosis Hypergranulation Muscle/Tendon Bone Hemostasis: EBL
Today's Additional Treatment Plan (for these wounds) Serial/Surgical Debridement performed today by the provider, with removal of biofilm, non-viable tissue, infected tissue excessive granulation surgical debridement will continue as needed, performed by the provider, while non-selective active wound care continues by staff between visits selective debridement will continue as needed, performed by the provider, while non-selective active wound care continues by staff between visits	

Provider Intials: