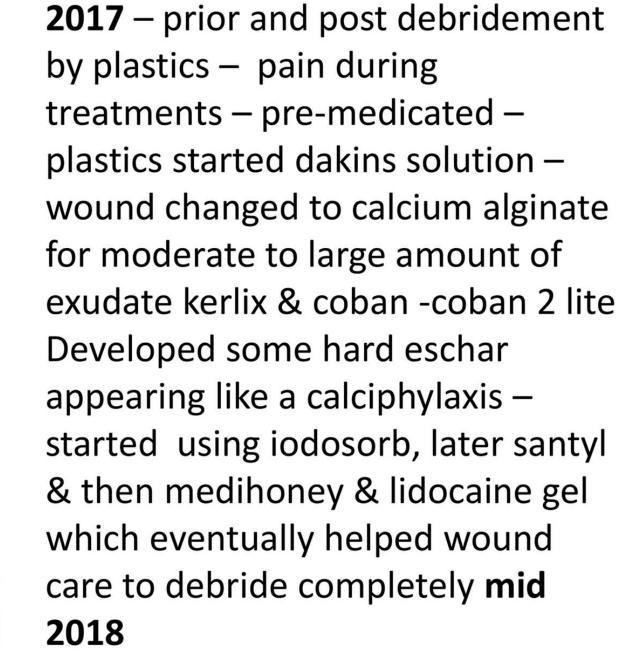


2017 – present – Wound clinic & then dermatology consulted – first seen April

2017 - then nutrition consult (vitamin C, zinc, juven), Plastics consulted, cardio clearance done prior to debridement – later change in cardio medications [amiodarone] needed adjustment for edema

May 2017 – Plastics - aggressive debridement of left leg to r/o Marjolins's ulcer & underlying squamous cell carcinoma – 10 open wounds to left leg – largest 20.0x17.0x0.4cm - dx of pyoderma gangrenosum*



May 2017 – confusion and unsteadiness possibly related to gabapentin – PCP notified and changed to qhs only

June 2017 - + MRSA – fungal & AFB – started on minocycline po derm

July 2017 - Derm -clobetasol topical added wound beds and 1 cm past, family to consider prednisone, wound continued with calcium alginate rope fluffed, optiloc cover, wrapping with cotton batting AND coban 2 lite to prevent damage from exudate.

HEALING AFTER 70+ YEARS

Presented by Deborah Harris, RNP, CWON, CFCS Livermore VA Wound Clinic, Division of Palo Alto, CA

Known history of patient's left leg

1946 – Gasoline burn to left leg at 4 years of age – upper & lower left leg & popliteal
1957, 1992, 2007 – skin grafts done – complications after last procedure continued to 2017
1970 - During his military service had no active issues

One year prior to being seen in **2017**, hunted deer and dragged home – when first seen, life had become sedentary

2007-2017 - Had infections treated with ABx several times since then & open wounds treated locally, denies biopsies during this time.

2009-2016 – treated weekly with xeroform with a home care agency

Medical hx - CAD, old inferior MI, EKG – RBBB, Aortic stenosis, s/p AV replacement & bypass to RCA (2009), HLD, HTN

December 2016 - temporary move to live with daughter out of state due to lack of improvement



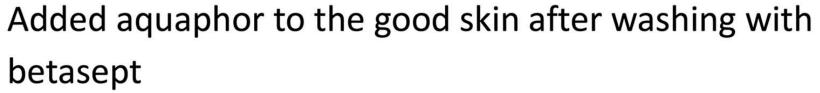












September 1, 2017 – added 60 mg prednisone trial x 3 weeks, include BS checks & d/c'd Minocycline due to pigmentation to wounds

September 15, 2017 - appt with PCP c/o of left knee pain stemming from fall from 3 years ago – xray shows joint space narrowing to the patellofemoral and lateral compartments – left knee osteoarthritis, prednisone 20mg three times daily, metronidazole 0.75% topical cream once a day for wounds (clobetasol stopped), Lasix started

October 4, 2017 – improvements in exudate noted, edema gone, wound beds mainly pink or red with few hard eschar areas, new pain to right shoulder from fall – awaiting CT scan results, becoming more sedentary





October 4, 2017 – improvements in exudate noted, edema gone, wound beds mainly pink or red with few hard eschar areas, new pain to right shoulder from fall – awaiting CT scan results, becoming more sedentary

November 2017 – started prematrix (Integra product needing blood absorption of patient through debridement) implants to thigh wounds – which took 100% to level of rest of skin – consulted physical therapy again – largest wound now 10.0x9.0x0.2cm - 50% improvement from May, 2017 depth shows most improvement post primatrix

Derm changed Prednisone to Humira due to little improvement in pyoderma gangrenosum – started 80mg first dose, 40mg 1 week later, now 40mg to start q2weeks subcutaneously

Orthopedics – results of shoulder CT scan shows diminished acromiohumeral space, with relatively normal glenohumeral space and severe arthritis of his AC joint - probable complete rotator cuff tear – given depo-medrol instead of surgery until leg healed

According to daughter, patient refusing to bathe and does not practice hygienic care of self - think non-relation outside family might help - started c/g agency 3 times a week – MH saw patient for c/o pain, depression and new pain to right should from fall, more sedentary

12/2017 - primatrix implant to back of knee – satisfactory, but less successful due to location & some HH issues – added skin wash prior to wound tx with betasept – rinsed well prior to each dressing change – restarted clobetasol to wounds and discontinued Flagyl topical

January 2018 – largest wound is 6.0x4.0cm with 2x2 hard eschar medial & proximal within wound bed - 40% improvement since last measurement in November, 2017. No edema no s/s inflammation, epithelialization is improving

March, 2018 – cardio meds decreased to Lisinopril 5 mg day, has stopped taking Lipitor, daughter will reinforce compliance, referral to PT & MH again

Admission to hospital March 16-18, 2018 with dx new onset AF,

Later 2018 - Slight set-back d/t hosp, but basically healed — it does not look pretty but plans now are for rehab prior to living independently









