UMC Health System DEEP TISSUE PRESSURE INJURY (DTPI) WOUND CARE SDO- DR. J. GRISWOLD	**Patient Label Here**

PHYSICIAN ORDERS

Diagnosis _____

Weight	_____ **Allergies** _____

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER	ORDER DETAILS
	Patient Care
	Please order under Dr. J. Griswold MD and use STANDING DELEGATION per policy WI-319.0 and PC-46.5
	Treatment Location
	Skin Intact
	Notify Nurse (DO NOT USE FOR MEDS) ☐ Relieve pressure, shear, and friction. Monitor closely.
	Apply Barrier Cream ☐ To: Deep Tissue Injury, Daily, Reapply Daily and PRN
	Apply Hydrocellular Foam Dressing ☐ To: Deep Tissue Injury, for protection.
	Skin Open
	Apply Dermal Wound Cleanser (Cleanse w/ Dermal Wound Cleanser) ☐ To: Deep Tissue Injury, Daily, and PRN, then Apply Hydro-gel
	Apply Hydro-gel ☐ To: Deep Tissue Injury, Daily, and PRN to wound bed, then apply hydrocellular foam dressing
	Apply Hydrocellular Foam Dressing ☐ To: Deep Tissue Injury, Daily, and PRN
	Wound Evaluation and Treatment by PT Bur (Wound Evaluation and Treatment by PT Burn Wound/Skin Care Services) ☐ Skin Care/Ostomy Services

☐ **TO**   ☐ **Read Back**   ☐ **Scanned Powerchart**   ☐ **Scanned PharmScan**

Order Taken by Signature: _____ Date _____ Time _____

Physician Signature: _____Signature on file_____ **Date** _____ **Time** _____

1201