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| **A.** | **Patient has a documented ulcer related to diabetes of the foot/lower extremity** | | |
| **B.** | **Diabetic Ulcer is a Wagner Grade III or IV:** | | |
|  |  | **Wagner Grade III** (Deep ulcer, in addition to at least one of the following conditions) | |
|  |  |  | Abscess (confirmed in operative report or other appropriate documentation) |
|  |  |  | Osteomyelitis (confirmed by x-ray, bone scan, MRI, bone biopsy or other appropriate test) |
|  |  |  | Pyarthrosis (bacterial joint infection) |
|  |  |  | Infection of a tendon or tendon sheath |
|  |  | **Wagner Grade IV** - deep ulcer with wet or dry gangrene of some part of the foot-lower extremity | |
| **C.** | **Ulcer has failed to respond to documented standard wound therapy for at least 30 days** | | |
|  |  | Name(s) of person(s) who provided previous care | |
|  |  | Dates of previous treatment | |
|  |  | Types of previous treatment (antibiotics, debridement, local wound care, etc.) | |
| **D.** | **Assessment of vascular status has been performed & optimized during 30 days prior to HBO**  *(must have documented pulses, results of at least one of the following diagnostic test, & measures to optimize)* | | |
|  |  | Documentation of presence or absence of lower extremity pulses | |
|  |  | TcpO2 evaluation and documented physician interpretation | |
|  |  | Segmental Doppler evaluation and documented physician interpretation | |
|  |  | Arteriogram and documented physician interpretation | |
|  |  | Documentation of procedures performed to maximize patient’s vascular status, or that no additional revascularization or other flow augmentation procedures are possible | |
| **E.** | **Assessment of nutritional status has been performed & optimized during 30 days prior to HBO** *(must have documented results of at least one of the following diagnostics & measures taken to optimize)* | | |
|  |  | Albumin | |
|  |  | Prealbumin | |
|  |  | Total protein | |
|  |  | Measures to address deficiencies are taken and documented | |
| **F.** | **Assessment of glucose control has been performed & optimized during 30 days prior to HBO**  *(must have documented results of at least one of the following two diagnostics & measures taken to optimize)* | | |
|  |  | Serial blood glucose | |
|  |  | Hemoglobin A1C | |
|  |  | Documentation of measures taken to address poorly controlled blood glucose *(must be more than “it is being managed by PCP”)* | |
| **G.** | **Devitalized tissue is addressed** *(must have documentation of one of the following)* | | |
|  |  | There is no devitalized tissue present | |
|  |  | Plan for debridement (by any means) to remove devitalized tissue | |
| **H.** | **Presence or absence of infection must be documented** *(must have documentation of one of the following)* | | |
|  |  | Ulcer is free of infection | |
|  |  | Measures taken to address treating any existing infection present | |
| **I.** | **Local wound care must include documentation of all of the following:** | | |
|  |  | Maintenance of a clean, moist bed of granulation tissue | |
|  |  | Utilization of appropriate moist wound dressings | |
|  |  | Appropriate offloading utilized during 30 days of standard care | |
| **Guidelines for On-going Treatment with HBO THERAPY** | | | |
|  | **Measureable signs of wound healing must have occurred during each 30-day period (+/- every 20 treatments) with HBO, as evidenced by documentation of at least one of the following:** | | |
|  |  | Decrease in wound size either in surface area or volume | |
|  |  | Decrease in amount of exudates | |
|  |  | Decrease in amount of necrotic tissue | |
|  |  | Improvement in tissue perfusion | |
|  |  | New epithelial tissue growth and/or granulation | |