

Service	Form name	Information Provider needs to fill in	Documentation/Labs/PreWork/Etc (* if optional)
Surgery	Wound Assessment Consultation	<p>Wound location:</p> <p>Other wound info:</p> <p>History relevant to wound:</p> <p>Pressure Ulcer Stage: I-IV; DTI (Suspect deep trauma);</p> <p>UNS (unsure, unspecified)</p> <p>Size: (cms) LxWxD</p> <p>Sinus tract/tunneling?</p> <p>Location/amount (cms):</p> <p>Undermining? Location/amount (cms):</p> <p>Exudate: Serous; Seroussanguinous; Purulent. Amount: None; Small (1-33%); Moderate (34-66%); Large (67-100%)</p> <p>Granulation Tissue: Red; pink; pale. Amount: None; Small (1-33%); Moderate (34-66%); Large (67-100%)</p> <p>Yellow Slough/Fibrin: None; Small, Medium; Large</p> <p>Black Necrotic Tissue: None; Small, Medium; Large</p> <p>Exposed Tendon? Exposed bone?</p> <p>Periwound tissue: Macerated? Intact? Warm(above normal)? Necrotic? Indurated? Purple? Rolled?</p> <p>Periwound tissue: Dry? Mottled? Flaking? Scarred?</p> <p>Hyperpigmented? Callused? Edges Irregular?</p> <p>Erythema (cms):</p> <p>Odor? Epithelialization?</p> <p>Wound Outcomes: Healed (epithelial tissue); Surgically closed; Grafted Healed; Grafted w/Partial Take</p> <p>Other:</p> <p>Pain level before dressing change (1-10):</p> <p>Wound care cleanser:</p> <p>Topical application: Antibacterial; Enzymatic Debrider; Hydrogel; Other (list)</p> <p>Wound Packing: Algniate; Silver Petrolatum; Foam; Gauze; Other (list)</p> <p>Wound Cover: Film; Foam; Gauze; Hydrogel</p> <p>Hydrocolloid; non-adherent; other (list)</p> <p>Periwound Prep?</p> <p>Pain level after dressing change (1-10):</p> <p>Additional comments:</p> <p>Negative Pressure Wound Therapy: Foam; Pressure;</p> <p>Periwound Prep</p>	
Urology	Urology Clinic Consultation Form	<p>Reason for requesting consultation/chief complaint:</p> <p>Relevant medical history:</p> <p>Media Sent (via Telerad)?</p>	Supporting Studies (check appropriate): labs, Xrays, CT, MRI, Ultrasound