



2009

VACUUM WOUND ASSISTED CLOSURE CRITERIA (MEDICARE)

The application of a vacuum assisted device is indicated when **ALL** the following criteria are met.

- Chronic wound present for at least 30 days; **AND**
- Failed standard wound therapy which encompassed all of the following:
 - Documentation in the patient's medical record of evaluation, care, and wound measurements by a licensed medical professional; **AND**
 - Application of dressings to maintain a moist environment; **AND**
 - Debridement of necrotic tissue if present, without presence of fistula formation, macroscopic; **AND**
 - Assessment of patient's compliance with the wound therapy program; **AND**
 - Evaluation of and provision for adequate nutritional status to ensure adequate levels of nutrients to promote healing are being provided; **AND**
 - All underlying medical conditions have been stabilized or are under current management (i.e., diabetes, venous insufficiency).

