

KCI V.A.C.® THERAPY PRESCRIPTION PAD (DO NOT SUBSTITUTE)

Fax to KCI at:
1-888-245-2295

Patient Name:

HIC/ID:

Delivery Address:

Phone:

Delivery Site
Type

- Private Residence SNF/LTAC Rehab Assisted Living Group Home Custodial Care
 Other _____

V.A.C.®
GranuFoam™

Dressing Kit: Small Medium Large Heel Thin Round Other _____
Dressing kits contain one V.A.C.® GranuFoam™ Dressing, V.A.C.® Drape and SensaT.R.A.C.® Pad

V.A.C.®
WhiteFoam

Dressing Kit: Small Large Dressing: Small (foam only) Large (foam only)
Dressing kits contain one V.A.C.® WhiteFoam Dressing, V.A.C.® Drape and SensaT.R.A.C.® Pad

Length of Need in Months: 1 2 3 4 Other _____

Start Date:

By signing and dating, I attest that I am prescribing the KCI V.A.C.® Therapy System (DO NOT SUBSTITUTE) as medically necessary and all other applicable treatments have been tried or considered and ruled out. I have read and understand all safety information and other instructions for use included with the V.A.C.® product as well as the KCI V.A.C.® Therapy Guidelines. I also understand the V.A.C.® Therapy system contraindications: Patients with malignancy in the wound, untreated osteomyelitis, non-enteric and unexplored fistulas, necrotic tissue with eschar present, sensitivity to silver (V.A.C. GranuFoam Silver® Dressing only). Foam dressings for the V.A.C.® Therapy System should not be placed directly in contact with exposed blood vessels anastomotic sites, organs or nerves. I prescribe the V.A.C.® Therapy System and up to 15 dressings per wound and 10 canisters per month.

Prescriber Name: _____ NPI#: _____

Prescriber Signature: _____ Date: _____

Prescriber only to sign and date. Original signature required. No stamps Allowed



V.A.C.® Therapy Recommended Guidelines for Treating Different Wound Types

Wound Type	Initial Cycle	Target Pressure V.A.C.® GranuFoam™	Target Pressure V.A.C.® WhiteFoam	Dressing Change Interval
Acute/Traumatic/ Partial Thickness Burns	Continuous first 48 hours	125 mmHg	125-175 mmHg, Titrate up for more drainage	Every 48 hours (every 12 hours with infection)
Surgical Wound Dehiscences	Continuous for duration of therapy	125 mmHg	125-175 mmHg, Titrate up for more drainage	Every 48 hours (every 12 hours with infection)
Meshed Grafts and Bioengineered Tissues	Continuous first 48 hours	75 - 125 mmHg	125-175 mmHg, Titrate up for more drainage	Remove dressing after 4-5 days when using either foam (drainage should taper prior to removal)
Pressure Ulcers	Continuous first 48 hours; Intermittent (5 min. ON/ 2 min. OFF) for rest of therapy	125 mmHg	125-175 mmHg, Titrate up for more drainage	Every 48 hours (every 12 hours with infection)
Chronic Ulcers	Continuous first 48 hours; Intermittent (5 min. ON/ 2 min. OFF) for rest of therapy	50 - 125 mmHg	125-175 mmHg, Titrate up for more drainage	Every 48 hours (every 12 hours with infection)
Flaps	Continuous for duration of therapy	125 - 150 mmHg	125-175 mmHg, Titrate up for more drainage	Fresh = every 72hrs. Complicated = every 48hrs (Every 12 hours with infection)