

Phlebolymphe^dema Decision Tree

WOCN Society recommends IPC for patients with Phlebolymphe^dema

What is Phlebolymphe^dema?

Under-utilized term that indicates lower extremity swelling due to **BOTH** chronic venous insufficiency (CVI) **AND** lymphatic insufficiency.

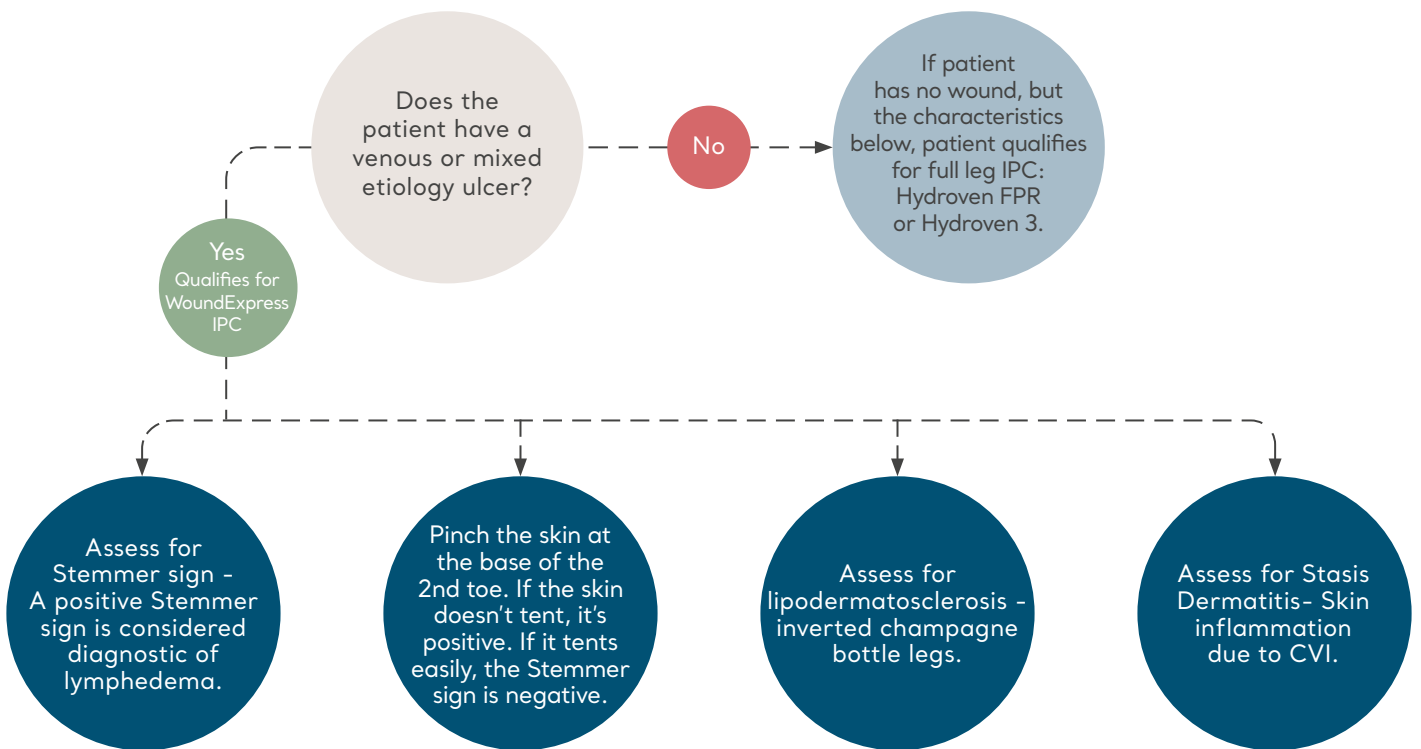
What does this mean for the patient?

The patient can get intermittent pneumatic compression (IPC) per CMS guidelines after 4 weeks of standard of care compression that does not progress or heal the venous leg or mixed etiology ulcer.

What does this mean for the clinician?

You only have to provide 4 weeks of documentation to the DME per CMS guidelines under the IPC for Lymphedema CMS guidelines.

How do you decide if the patient has Phlebolymphe^dema?



Have the provider and nurse document phlebolymphe^dema in the notes with the supportive documentation listed above. Submit provider/clinic notes along with other items on the Reimbursement Guideline sheet to order your pump for your patient!

Ratliff, C. R., Yates, S., McNichol, L., & Gray, M. (2022). Compression for Lower Extremity Venous Disease and Lymphedema (CLEVDAL): Update of the VLU Algorithm. *Journal of Wound Ostomy & Continence Nursing*, 49(4), 331-346.
Farrow, W. (2010). Phlebolymphe^dema—a common underdiagnosed and undertreated problem in the wound care clinic. *The Journal of the American College of Certified Wound Specialists*, 2(1), 14-23.