

**Chronic Venous Insufficiency (CVI) Risk Plan**

**Participant’s Name:**

**Date plan begins:**

**Date Plan expires:**

**Dates of Revisions:**

**Written by:**

**Risk:**       is at risk of leg ulcers, infection, leg pain, and cellulitis.

**Desired Outcome:**       follow proactive measures to manage venous insufficiency in order to avoid leg ulcers, infection, leg pain, and cellulitis. Staff will respond as trained if symptoms of chronic venous insufficiency or cellulitis are exhibited.

**Why at risk/History:**

**Chronic venous insufficiency (CVI)** is a condition that occurs when the venous wall and/or valves in the leg veins are not working effectively, making it difficult for blood to return to the heart from the legs. This causes blood to collect in the veins and increases the pressure on the vein walls causing them to weaken. Excess water retention adds to the pressure and can make the condition worse. If CVI is not treated, the pressure and swelling increase until the tiniest blood vessels in the legs (capillaries) burst, turning the skin a reddish-brown and leaving it very sensitive if bumped or scratched. These burst capillaries can cause inflammation, internal tissue damage, ulcers, open sores, infection, and cellulitis.

**Supports and interventions:**

* Staff will encourage      , as needed, to eat a low sodium diet to reduce excess water retention.
* Staff will encourage      , as needed, to wear compression stockings to decrease swelling.
* Staff will assist in caring for any open sores, wounds, or infections, as trained.
* Staff will encourage      , as needed, to elevate legs above the heart when resting.
* If exhibiting swelling, warmth, or redness, apply cool compresses to help with inflammation and comfort.

**Monitor:**

**Symptoms of venous insufficiency:**

* Dull aching, heaviness, tiredness, or cramping in legs
* Itching and tingling
* Flaking or itching skin on legs or feet
* Pain that gets worse when standing
* Pain that gets better when legs are raised
* Swelling of the legs or ankles
* Red or reddish-brown coloring of legs and ankles
* Varicose veins on the surface
* Thickening and hardening of the skin on the legs and ankles
* Ulcers on the legs and ankles

**Symptoms of cellulitis:**

* Redness
* Red streaks
* Swelling
* Warmth
* Pain or tenderness
* Leaking of yellow, clear fluid or puss

**Severe symptoms of cellulitis:**

* High fever or chills
* Nausea and vomiting
* Enlarged or hardening of the area
* Increased pain
* Numbness when the area is touched
* Other medical problems that may be affected by even a minor infection

**Notify:**

* **Call 911 if exhibiting severe symptoms of cellulitis**, **emergency intervention was necessary, such as, back blows, abdominal thrusts, CPR, etc., exhibiting multiple or severe symptoms, if more than first aid is needed for injuries, if they hit their head, any type of reaction that interferes with the ability to breathe or swallow, rapidly worsening symptoms, or loss of consciousness.**
* Notify Program Manager, Health and Safety Tech and/or Nurse of any symptoms of venous insufficiency, cellulitis, change of condition, or concerns.
* Program Manager will notify family, guardian, other Program Managers, and/or Providers of any symptoms of venous insufficiency, cellulitis, change of condition, or concerns.
* Staff will document on incident report by end of shift.

**If 911 is called:**

* Remain with       until EMTs arrive. If emergency intervention was necessary, continue as trained until relieved by EMTs.
* Ensure that emergency personnel are aware of all medical conditions, allergies, and medications.
* Follow       to the hospital and remain with participant until relieved by staff or family.
* Complete an incident report by end of shift and BDDS report within 24 hours.

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| **Provider** |  | **Risk Plan** |  |  | **Date Effective** |
| **Paladin** | | **Chronic Venous Insufficiency (CVI)** | | |  |
| **Print Name** | | **Signature** | **Company/Title** | | **Date** |
|  | |  | **Paladin/Program Manager** | |  |
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