

OASIS Alert

Get CMS' Answers to Your Pressure Ulcer Questions

There always seem to be situations that aren't easily reported in M1324. Through the quarterly OASIS Q&A's, CMS points you in the right direction for some of the most common pressure ulcer circumstances. What if:

Your patient's worst pressure ulcer is a previously observable Stage 4 pressure ulcer that is now covered with slough or eschar?

This pressure ulcer can't be staged until the wound bed is visible. Because you cannot do a visual assessment, you'll list NA for M1324.

Your patient's only pressure ulcer has been sutured closed?

Report NA because the ulcer is closed and can't be staged. For the purposes of OASIS data collection, this pressure ulcer is considered unstageable due to a nonremovable dressing or device.

Your patient was admitted for aftercare post skin graft of a stage III pressure ulcer of the hip with orders for the pressure dressing to remain in place until his first office visit? This is his only pressure ulcer.

Report NA for this patient because you cannot visualize the wound bed. But if at discharge, the patient's graft site has healed with some contracture and discoloration of the grafted site, you'll answer 3 -- Stage III.

Tip: The "NA" response on M1324 has a different meaning than listing "NA" on M1320 -- Status of most problematic (observable) pressure ulcer. You'll mark M1320 "NA" only if the patient's pressure ulcer is covered by a nonremovable dressing or device, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COSC**, consultant and principal of **Selman-Holman & Associates** and **CoDR -- Coding Done Right** in Denton, Texas. Ulcers with eschar and/or slough should be marked as not healing or early/partial granulation depending on how much eschar and slough is present and deep tissue injuries are always marked non-healing, she says.

Another tip: Stage II pressure ulcers should also be marked not healing because they don't have granulation tissue, Selman-Holman says.