

## **Survivor Shop Guidelines**

Title: Patient Intake Assessment for Compression Sleeve, Glove Fitting

Responsibility: Certified Mastectomy Fitter

Equipment: N/A

<u>General Rule:</u> The provider must be notified, within 5 calendar days, if the equipment or services ordered cannot be provided to the patient.

Procedure: Point of Emphasis

All appointments are set up through Central Scheduling 419-383-5000

Insurance coverage will be verified along with other pre-registration information. Central Scheduling is to discuss the need for a physician order at the time of the appointment set-up.

Advise customer to visit registration upon arrival to complete registration for the fitting.

Demographic information is required to complete billing process.

Upon arrival patient will be asked to sanitize hands. Patient will provide physician order for needed products prior to the fitting or we will have obtained the order from the doctor office.

This paperwork will be scanned into their EMR.

Proceed to fitting room and document in Athena form.

Ask the client to be involved in the fitting as much as possible.

Offer client a robe for comfort. The client will need to have the limb to be measured out of their clothing Note indications of radiation treatments, node removal, existing lymphedema, skin conditions-no rash, open wound, and range of motion, etc. NOTE: Doctors script will advise the compression class to be ordered. ANY open wound or rash we will not be able to fit until clarified.

For custom gloves you will be making a drawing of their hand and be measuring with the finger tapes if provided.

Follow the manufacturer's instructions.

At the time of delivery, ready to wear compression garments and custom compression garments are reviewed for manufacturer quality and safety.

Care for compression garments is different for each manufacturer.

To ensure quality and safety of the item being provided to the client that the item is free of defects, wear, etc. Information will be scanned into EMR.

Recommendations made to the client to follow manufacturer's instructions on care and donning and removal of compression garment to prolong the life of the garment.

Approved by:	
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Approved: 02/23/2015

Reviewed: 02/23/2015, 8/2017

Revised: 7/22/2020