

*VALLEYCARE*  
**OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS  
REHABILITATION SERVICES  
POLICY & PROCEDURE**

**NUMBER: 1185  
VERSION: 1**

**SUBJECT/TITLE: LYPHHEDEMA PROGRAM**

- POLICY:** The focus of lymphedema treatment is patient self-management through education, compression, and home program.
- PURPOSE:** To decrease the risk of complications involving lymphedema, promote independence in self-management and minimize the development of lymphedema in high risk patients.
- DEPARTMENTS:** REHABILITATION SERVICES
- DEFINITIONS:** Lymphedema is an abnormal swelling that may occur in any area of the body, due to protein rich lymph fluid accumulating in the interstitial tissues. This may occur in any area of the body, due to primary or secondary lymphedema. Primary lymphedema occurs when the patient has a congenital shortage of lymph nodes or vessels. Secondary lymphedema may develop in any area of the body post-operatively when lymph nodes have been removed or if there has been trauma, repetitive infections, or radiation to areas rich in lymph nodes/vessels.
- PROCEDURE:**
- A. Patients referred to physical therapy for assessment/treatment of lymphedema are scheduled either in the Compression Garment Clinic or for an evaluation with a therapist experienced in lymphedema treatment.
  - B. Patient Assessment and Treatment
    1. The therapist performs a comprehensive assessment of the patient to determine if any other deficits, in addition to lymphedema, exist. A doppler exam is performed on all patients prior to starting compression therapy of the lower extremities. The treatment provided will be based on the therapist's assessment.
    2. The overall goal of lymphedema treatment is to teach the patient to be independent in self-management of their condition, reduce or maintain current limb size or area that has edema, and educate patients on lymphedema.
    3. Patients at high risk of developing lymphedema can be referred to the lymphedema program for preventative education. A compression garment may be provided prophylactically in order to minimize the development of future edema.
    4. The patient must be functionally capable and motivated to perform the home program, otherwise the patient will not be successful in managing their lymphedema. In the event the patient is unable to

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comply with the therapist’s instructions, a caregiver may be trained to assist or perform the treatment program.

5. Once the edema has plateaued or reduced to a size where not much change is occurring, the patient will be measured for a compression garment which will maintain this newly reduced size.
6. Discharge
  - a. Patients will be instructed in a home program for which they will be expected to treat lifelong.
  - b. Patient will be discharged with a compression garment, if appropriate. The patient must physically be able to don and doff the garment or have the assistance of a caregiver in order to be eligible for a compression garment. Only medical grade (>20-30 mmHg) compression garments will be ordered. Patients that cannot tolerate a minimum of 20-30mmHg will be provided information on where they can purchase lower grade compression garments.
  - c. Once discharged from physical therapy, the patient will need a new referral if there is a future exacerbation of their lymphedema.
  - d. Patients will be eligible for a new compression garment every six months with a new referral.

References:	
Approved by: Joann York (Physical Therapy Chief I), Joselin Escobar Duran (Assistant Hospital Administrator II)	Date: 2/1/08 07/11/2013
Review Date: 2/4/08 <b>05/08/2020</b>	Revision Date:
Distribution: Rehabilitation Services	
Original Date: 2/1/08 07/11/2013	