Q: Should I let my wound be open to air?
A: No, wound healing best occurs when the wound bed is kept moist and the healing cells can travel across the wound to close it. The purpose of dressings prescribed for you is to maintain just the right amount of moisture, not too much and not too little. Dressings will also protect the wound from contaminants in the environment.

Q: Can I get my wound wet in the shower?
A: Yes, unless you have sutures (stitches), staples, exposed bone, or your doctor has advised against it. Make sure you ask before you shower or bathe. If you need to keep your wound dry, use a garbage bag or some sort of plastic to cover it when you shower. Typically, you should not be "soaking" your wound.

Q: What if I forget to change my dressing?
A: As soon as you remember, change your dressing. Be careful when removing it, just in case it is stuck to the wound. If your dressing is stuck, use enough water to soak it, so that it comes off without causing you any pain. Then, redress your wound as your doctor has directed.

Q: How do I cleanse my wound?
A: You can cleanse your wound using normal saline (saltwater), or a special wound cleanser prescribed by your doctor.

Q: Can I use a whirlpool to clean my wound?
A: No, water under pressure may drive bacteria (germs) into the wound tissue. We do not typically recommend whirlpool on a regular basis.

Q: If I get dry skin, can I use lotion?
A: Yes, skin that is kept moist is less likely to break down. But do not put skin lotion in the wound. If you have skin that is broken open, please ask the doctor for a recommended product.

Q: What kind of skin lotion do you suggest?
A: Any kind of lotion that is an emollient, which puts moisture back into the skin instead of covering the skin as another layer. For example, do not use petroleum jelly, because it forms a separate layer. Examples of emollients: Curel Moisturizing, Nivea, Neutrogena, A&D ointment, Vitamin A&D, Eucerin Moisturizing, Keri Lotion, and Lubriderm.

Q: Will the sun’s rays, or a sun lamp help my skin?
A: No. These will dry out the wound bed. The goal is to keep the wound bed moist. In addition, skin may be burned, which can cause other problems.

Q: What does it mean if an area of my skin changes color?
A: Some skin changes are not harmful, but changes like redness can be the sign of a problem. Inspect the skin around the wound daily for any changes. Show any changes (especially redness) to your health care provider promptly.
Q: Can I use betadine or hydrogen peroxide on my wound?
A: No. We do not recommend these solutions, because they can kill healthy cells.

Q: If I am a diabetic, is it important to keep my blood sugar in control?
A: Yes, it is very important. High blood sugar can slow down or prevent wound healing. Discuss with your wound care doctor what should be a desirable level for your blood sugar. If you have diabetes, be sure to eat properly and continue your prescribed medications (including insulin) during your course of hyperbaric treatment. Your blood sugar will be checked during each visit to the Wound Center.

Q: What does hyperbaric therapy feel like?
A: Patients spend the two-hour treatment comfortably resting inside the hyperbaric chamber. Pressure is gradually increased, and the temperature will temporarily rise. When the desired pressure is achieved, the temperature will be adjusted to your comfort. You may experience fullness in your ears as a result of the increased pressure. The technician will instruct you in ways to help reduce the pressure and relieve any discomfort.

Q: What can I do to pass the time during hyperbaric treatment?
A: Each hyperbaric chamber is equipped with its own TV, with cable network connections so you can watch your favorite programs during treatment. Or, you may just relax and sleep. For safety reasons, books or other reading materials are not permitted inside the chamber.

Q: If I am sick, should I still have my hyperbaric treatment?
A: Please come for your scheduled appointment, but let the staff know if you have a cough or cold, the flu, a sore throat, chills, nausea, vomiting or diarrhea. Also be sure to let the staff know of any changes in medications you are taking.

Q: Will there be any side effects of the hyperbaric therapy?
A: You may experience temporary vision changes, which should subside a few weeks after your therapy is complete. You may also experience fatigue. Both are normal side effects.

Q: How long should I plan to be at the wound center for hyperbaric treatment?
A: Please allow up to two and one-half hours for each visit.

Q: May I drive myself to my treatments?
A: Yes.

Q: What other things should I be reporting to my wound care doctor?
A: Please inform your doctor of the following:
• Pain from your wound
• Increased drainage from your wound
• High blood sugar, if you are diabetic
• Redness in the skin around your wound
• Bleeding from your wound
• Changes in your body temperature, blood pressure or mental orientation
• Need for dressing supplies
• Any new wounds you find on your body
• Any changes in your medication
• Difficulty in completing the prescribed dressing changes
• Any questions or concerns you have about your wound care