

Maxxcare[®] Wound Care Log (WLOG)

Patient Name:

Date of Birth:

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Medical Record Number: [MRN]

Date:

Time:

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Wound Description:

Location: [e.g., Sacrum, Heel, etc.]	
Stage: [e.g., Stage II, Stage III, etc.]	
Size: [Length x Width x Depth in cm]	
Appearance: [e.g., Red, Granulating, Necrotic, etc.]	
Exudate: [e.g., None, Serous, Purulent, etc.]	
Odor: [e.g., None, Foul, etc.]	

Wound Care Procedure:

Cleaned with: [e.g., Normal Saline, Antiseptic Solution, etc.]	
Debridement: [e.g., Sharp, Autolytic, None, etc.]	
Dressing Applied: [e.g., Hydrocolloid, Foam, Gauze, etc.]	
Additional Treatments: [e.g., Antibiotic Ointment, Negative Pressure Wound Therapy, etc.]	

Patient Response:

Pain Level: [e.g., 0-10 scale]	Patient's Comments:
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Caregiver Information:

Nurse/Doctor Name:	Signature:
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