

PHS

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Pima Health System - Office of Medical Management

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**Pima Health System
Clinical Practice Guideline for
the Diagnosis and Management
of Lymphedema**

October 2009

Pima Health System Clinical Practice Guideline/Medical Management Committee Membership

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Purpose of this Document

Pima Health System has adopted the National Cancer Institute's, **Lymphedema (PDQ®), Health Professional Version (June 2009)**, to serve as an evidence-based framework for practitioners' clinical decision making for patients who have lymphedema. Extensive literature review on lymphedema and Practice/Clinical Guidelines developed for lymphedema suggests that the National Cancer Institute's, **Lymphedema (PDQ®), Health Professional Version (June 2009)**, is among the most comprehensive, evidence-based summary for this condition. This summary includes an overview of lymphedema including physiology and diagnosis; management including prevention and treatment; and an overview of potential complications.

As with all guidelines, this adopted clinical guideline is designed to assist practitioners by providing an analytical framework for the evaluation and management of members and is not intended to either replace the practitioners' judgment or to establish a protocol for all members with a particular condition. Clinical practice guidelines need to be revised periodically based upon changes identified in both local and national practice patterns and standards. This allows deviation in unique clinical situations as long as the reason for variation is clearly documented in the medical record.

Obtaining Copies of the National Cancer Institute's Summary

Copies of the National Cancer Institute's, **Lymphedema (PDO), Health Professional Version (June 2009)** may be obtained through the National Cancer Institute at:

www.cancer.gov/cancertopics/pdq/supportivecare/lymphedema/healthprofessional

Provider Feedback

Pima Health System welcomes feedback on all of our practice guidelines. All suggestions and recommendations are taken into consideration by the health plan's Clinical Practice Guideline/Medical Management Committee in our ongoing review and revision of the guidelines. Comments may be submitted to:

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Guideline Approval

Guideline: Diagnosis and Management of Lymphedema	PHS CLINICAL PRACTICE GUIDELINES
Applicable To: Ambulatory, Long Term Care	
Effective Date: 10/2009 Approved By: <i>Fred Miller, MD, PhD</i>	
Supersedes: 6/05, 10/07 , 10/08 (this guideline replaces Treatment of Lymphedema related to Breast Cancer)	