



Hospice Case Study

*TideWell Hospice and Palliative Care,
Formerly known as Hospice of Southwest Florida, Sarasota, FL*

Recently pt# 65811 was transferred to the Bradenton Hospice House for end of life care.

This patient was admitted to a hospice with a diagnosis of melanoma. He had multiple tumors on his anterior chest wall. One lesion at the base of his right neck measured 10 x 4 cm. He had another lesion measuring 3 x 2 cm in the right medial supraclavicular fossa with multiple satellite lesions at the periphery of the two major lesions.

The two larger lesions began bleeding. Initially the bleeding was minimal and easy to control. The bleeding soon became more extensive and difficult to control. When attempts to control his bleeding failed he was sent to a local emergency room, where he underwent cauterization. However, this was unsuccessful in stopping the bleeding as well. When it became apparent that the bleeding was not stopping, he was transferred to our facility for end of life care. It was felt that he was going to slowly exsanguinate.

Upon arrival, I applied QR Powder and was successful in stopping the bleeding. The next morning the wound sites were again oozing blood and I applied QR Powder to each wound. This was successful in bringing about hemostasis.

The patient was observed for two days and subsequently transferred back to his home of record.

*Case Study by Dr. Douglas Rogers,
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