

- saturate the wound with saline before removing the dressing.
- Using tweezers, forceps or a gloved hand, gently lift the dressing away from the wound base. The high wet strength generally allows it to remain in one piece
 - If required, gently cleanse the wound of remaining dressing material using tap water, sterile saline or a recommended commercial brand of wound cleanser.
 - Follow instructions for re-applying the dressing.

Frequency of Change

Dressing change frequency will depend on the type and condition of the wound. Change the dressing if the wound exudate (drainage) begins to pool within the wound or if the secondary dressing becomes saturated with exudate (drainage). Generally dressings should be changed daily in heavily exuding (draining) wounds or infected wounds, reducing to twice weekly changes as the level of wound exude (drainage) decreases.

HEALTHCARE PROFESSIONAL USE

Indications

Under the care of a healthcare professional, ALGISITE M may be used in the management of full thickness wounds with moderate to heavy exudate (drainage) such as

- Leg ulcers
- Diabetic foot ulcers
- Pressure ulcers
- Surgical wounds.

Directions for Use

The following treatments are designed to act as general guidelines and should only be done under the direct supervision of a healthcare professional.

For Full Thickness Wounds: leg ulcers, pressure ulcers, diabetic foot ulcers, surgical wounds or other wounds healing by secondary intent.

- Cleanse the wound using tap water, sterile saline or a recommended commercial brand of wound cleanser.
- Choose a size of ALGISITE M slightly larger than the wound

and place it in intimate contact with the wound base, ensuring the entire surface is covered. The dressing is not intended to overlap the wound edges so any overlap should be cut off or folded over the wound surface. If the wound is deep or undermined, the alginate strip may be the best choice.

- Cover with an appropriate secondary dressing to hold the ALGISITE M in place. The alginate will absorb exudate (drainage) and form a gel over the wound surface. Wound exudate (drainage) will evaporate from this gel surface. The secondary dressing should not limit this evaporative process especially when exudate (drainage) is heavy as this might trap the exudate (drainage) over the wound and macerate (overhydrate) the skin around the wound.

Changing the Dressing

- Carefully remove the secondary dressing holding the ALGISITE M in place.
- If the wound appears dry, saturate the wound with saline before removing the dressing.
- Using tweezers, forceps or a gloved hand, gently lift the dressing away from the wound base. The high wet strength generally allows it to remain in one piece.
- If required, gently cleanse the wound of remaining dressing material using tap water, sterile saline or a recommended commercial brand of wound cleanser.
- Follow instructions for re-applying the dressing.

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Product Availability

Code	Size	Unit of Sale
59480100	2in. x 2in. / 5cm x 5cm	Box of 10
59480200	4in. x 4in. / 10cm x 10cm	Box of 10
59480300	6in. x 8in. / 15cm x 20cm	Box of 10
59480400	3/4in. x 12in. / 2cm x 30cm	Box of 10

Manufacturer

Made in England for
Smith & Nephew Medical Limited, Hull HU3 2BN England.

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