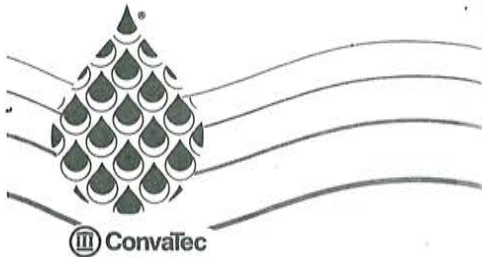


STERILE  
**DuoDERM**  
EXTRA THIN

EXTRA THIN CGF® DRESSING

For the protection and management of superficial dermal ulcers



### PRODUCT DESCRIPTION

DuoDERM Extra Thin dressings are highly flexible, control gel formula dressings designed for use on dry to lightly exudating wounds. DuoDERM Extra Thin dressings are particularly suitable in areas subject to friction and those requiring contouring, e.g., elbows, heels.

DuoDERM Extra Thin dressings interact with wound moisture producing a soft mass that enables removal of the dressing with little or no damage to newly formed tissues. They help isolate the wound against bacterial and other external contamination.

### INDICATIONS

- Management of superficial, dry to lightly exudating dermal ulcers.
- Post-operative wounds.
- Protective dressings.

### CONTRAINDICATION

Should not be used on individuals who are sensitive to or who have had an allergic reaction to the dressing or its components.

### PRECAUTIONS AND OBSERVATIONS

#### When Used on Dermal Ulcers:

1. Initial use of this product should be under the direction of a health professional.
2. DuoDERM Extra Thin Dressing provides local management of the wound site. In chronic wounds other aspects such as repositioning of the patient and nutritional support should not be neglected.
3. Increased Wound Size: Deeper tissue damage may have already occurred under an apparent superficial dermal ulcer. When using any occlusive dressing, particularly in the presence of necrotic material, the wound may increase in size and depth during the initial phase of management. Leg ulcers resulting from vasculitis may rapidly deteriorate during exacerbation of the underlying disorder.

**Odor:** Wounds, particularly those that are large or necrotic, are often accompanied by a disagreeable odor; however, this is not necessarily indicative of infection. The odor should disappear when the wound is cleansed (see infection).

**Infection:** If signs of clinical infection should develop, such as: uncharacteristic odor or change in the color of the exudate, fever or cellulitis (tenderness and erythema in the area of the wound), a bacterial culture of the wound site should be taken. If clinical signs of infection are present, appropriate medical treatment should be initiated. DuoDERM dressings may be continued during the treatment at the discretion of the clinician.

### PREPARING AND CLEANSING THE WOUND SITE

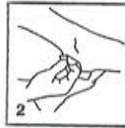
DuoDERM Extra Thin dressings are sterile and should be handled appropriately.

Choose a dressing that will extend at least 1 1/4" beyond the wound margin. Cleanse the wound according to hospital practice. Irrigate with saline and dry the surrounding skin to ensure it is free of any greasy substance.

### APPLYING THE DRESSING



- 1) Minimize finger contact with adhesive surface.



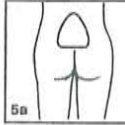
- 2) Apply in a rolling motion, avoid stretching.



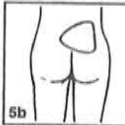
- 3) Smooth into place, especially around the edges.



- 4) When applying to a heel or elbow, it may be helpful to cut a slit approximately 1/3 across each side of the dressing to facilitate application.



- 5) On a sacral ulcer, press into anal fold (a). Depending on the location and depth of the sacral ulcer, the tri-angle shaped dressing may be applied in different directions (b).



- 6) This direction may be advantageous for ulcers close to anal verge.



- 7) Use hypoallergenic tape around the edges to secure.

### REMOVING THE DRESSING



- 1) Press down on the skin and carefully lift an edge of the dressing. Continue around until all edges are free.

Repeat cleansing procedure. It is unnecessary to remove all residual dressing material from the surrounding skin.

Leave the dressing in place (not more than 7 days) unless it is uncomfortable, leaking, or there are clinical signs of infection.