

Patient Guide for Applying AQUACEL® Dressing or AQUACEL® Ag Dressing



Initial look of the dressing before it is put on the wound.



As the dressing absorbs wound fluid, it gels.



It is normal for the dressing to take on the color of the wound fluid.

Tips for use*

- Always wash your hands before and after each dressing change, and follow the instructions provided by your doctor or healthcare provider
- Cleanse with a proper wound cleanser, like SÄF-Clens® AF dermal wound cleanser or Shur-Clens® wound cleanser, and dry the surrounding skin thoroughly

Call your doctor or healthcare provider if you notice **any of the following** as they may be signs of infection^{†,1}:

- “Drainage excess, change in color/consistency”
- “Redness”
- “Warmth around the wound”
- “Poor granulation tissue”
- “Pain or tenderness”
- “Unusual odor”
- “Sudden high glucose in patient with diabetes”

Ordering information for AQUACEL® dressing

Unit Size	Quantity Per Box	Product Number	HCPCS Code
Squares			
2" x 2"	10	177901	A6196
4" x 4"	10	177902	A6196
6" x 6"	5	177903	A6197
Ribbon			
0.75" x 18"	5	177904	A6199

Ordering information for AQUACEL® Ag dressing

Unit Size	Quantity Per Box	Product Number	HCPCS Code
Squares			
2" x 2"	10	403706	A6196
4" x 4.7"	10	403765	A6197
6" x 6"	5	403710	A6197
8" x 12"	5	403711	A6198
Ribbon			
0.75" x 18"	5	403712	A6199

*Please see package insert for complete Directions for Use.

†The dressing may be used on infected wounds under the care of your doctor or healthcare provider.

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Application Techniques*

Before applying the dressing, cleanse the wound area with a proper wound cleanser such as SÄF-Clens® AF dermal wound cleanser or Shur-Clens® wound cleanser, and dry the skin around the wound thoroughly.



For Wounds That Are Not Deep

The dressing should overlap 1 cm (1/2 inch) onto the intact skin surrounding the wound. The dressing will shrink as it absorbs wound fluid and gels.



For Deep Wounds

When using the dressing ribbon in deep wounds, leave at least 2.5 cm (1 inch) outside the wound for easy removal. Only fill the dressing into deep wounds up to 80% (almost to the top), as the dressing will swell as it absorbs the fluid.



Apply a Cover Dressing on Top

Place the dressing on the wound and cover with a cover dressing that keeps the wound moist (e.g. DuoDERM® Extra Thin dressing, DuoDERM Signal® dressing, or Versiva® dressing). See individual package inserts for instructions regarding usage and cover dressing removal. If covering with gauze, change when wound fluid strikes through the outer layer.



Remove

While the dressing may have to be changed every 2 to 3 days in the beginning, it can be left on the wound for up to 7 days when the wound is almost closed. The dressing should be changed when it is saturated with wound fluid or if the cover dressing's edges are bunching, rolling up, or leaking. All wounds should be inspected frequently. Remove the dressing when medically indicated (wound fluid comes out of the dressing, there is too much bleeding, or you have increased pain). If residual dressing is left in the wound, irrigate with wound cleanser. If the dressing dries and is hard to remove, moisten with sterile saline or sterile water until it lifts easily. It may take several minutes for it to gel.

***Please see package insert for complete Directions for Use.**

Reference: 1. Stotts NA. Wound infection: diagnosis and management. In: Bryant RA, ed. *Acute & Chronic Wounds*. 2nd ed. St. Louis, Mo: Mosby; 2000:179-188.

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