



A clear advantage in wound management

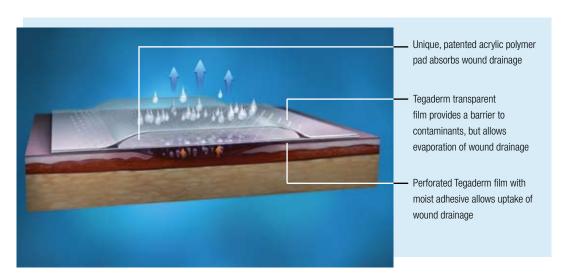
"This is the best wound dressing I have seen in thirty years of nursing"

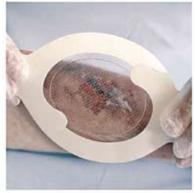
Sue Butterfield, Practice Nurse, West Yorkshire



3M[™] Tegaderm[™] Absorbent Clear Acrylic Dressing is a transparent, absorbent dressing

offering an extended wear time and a clear view of the healing wound







Extended wear time - dressing can stay in place beyond seven days

requiring fewer dressing changes for the patient^{1,3}

Transparent absorbent dressing

wound bed can be continuously observed, reducing the need for potentially painful dressing changes2,3

*Protects against bacterial and viral contamination7

reducing the risk of infection

patient able to shower and maintain personal daily activities whilst wearing dressing^{4,8}

Product promotes autolytic debridement

enabling best practice in wound bed preparation4,9

Dressing does not disintegrate

easy and comfortable to remove³

Easy to apply

quick and comfortable application⁵

Hypoallergenic and latex free

removes the risk of irritation and allergic reactions



A clear advantage in skin tear management

Tegaderm Absorbent Clear Acrylic dressing. Case study on an 88 year old patient with a category 2a skin tear¹⁰ thickness pre-tibial laceration



23/04/2009
Day of injury. Tegaderm absorbent dressing in situ



10/06/2009 23 days wear time. 3rd dressing change



26/06/2009 16 days wear time. 4th dressing change



12/08/2009 End of evaluation

Case study presentation, Graham K, Lloyd-Jones R & Evans A, (2009) There's no messing with this dressing! Using $3M^{TM}$ TegadermTM Absorbent Dressing for managing pre-tibial lacerations in the Nursing Home setting. Poster presentation Wounds UK Conference, November 2009.

Application technique



1. Hold the dressing by a tab and peel the liner from the dressing, exposing the pad surface.



Hold the dressing by the tabs and centre over the wound, pad side down. Avoid stretching the dressing.



3. Gently press the dressing in place, smoothing from the centre outward.



4. Slowly remove the paper frame while pressing down and smoothing the film border to ensure good contact.

Removal technique

- Carefully lift the film edges from the skin. Apply a piece of tape to the edge of the dressing and use tape to lift.
- 2. Using the stretch-and-release technique, continue lifting the film until all edges are free from the skin surface.
- 3. Remove dressing slowly, folding it over itself. If the skin tear has the flap intact, remove in the direction of the flap.



See the effect in wound management

Indicated for

- Pressure Ulcers
- · Leg Ulcers
- Abrasions
- Friction Burns



Sacral pressure ulcer prior to application

Case study presentation, Simon, D (2009). The management of a sacral pressure ulcer using an absorbent clear acrylic dressing. Poster presentation Wounds UK conference, November 2009



Day 20 prior to 2nd dressing removal



Wound healed within 20 days of first dressing application



Indicated for

- · Skin graft donor sites
- Post-operative wounds
- 1st (superficial thickness) and 2nd (partial thickness) degree burns

Visible results in acute wound management



During application on skin graft donor site



Dressing in situ

Images taken from oral presentation, Dr P. Terrill, 2008 WUWHS.*

"Dr P. Terrill. "The Split Thickness Skin Graft Donor Site -Have we found the perfect dressing?"

(Third Congress of the World Union of Wound Healing Societies, Toronto, Canada 2008)*

3M[™] Tegaderm[™] Absorbent Clear Acrylic Dressing Payne-Martin classification for skin tears¹⁰

Category	Amount of tissue lost	Description	Example
1 (a & b)	Without tissue loss	Linear type (1a)	
		Flap type (1b)	
2 (a&b)	Partial skin loss	Scant (<25%) tissue loss (2a)	
		Moderate (<25%) tissue loss (2b)	
3	Entire loss of tissue	Epidermal flap completely lost	

Characteristics of various dressing materials used for skin tear management¹

Dressing Characteristics	Clear absorbent acrylic dressing	Transparent film dressing	Hydrogel dressing	Wound contact layer	Foam dressing	Antibiotic ointment and gauze dressing
Absorbent	•				•	
Can visualize skin tear	•	•				
Wear time allows minimal disruption of wound	•			•	•	
Provides moist healing environment	•	•	•	0	•	
Barrier to contamination	•	0			0	
Promotes comfort	•	•	•	•	•	
Easy to apply	•	•	0	•	•	•
Does not require cover dressing or secural	•	•			0	
Stays in place, does not slip	•	•			0	
Protects wound from mechanical damage	•	•			•	

• Dependent on dressing characteristics

- Tegaderm Absorbent Clear Acrylic Dressing prevented wound disruption and pain associated with dressing changes, while saving nursing time and supplies cost¹
- Allowed visualisation of wounds without having to remove dressings²
- Dressing has no upper limit wear time which can increase its cost-effectiveness³
- 1. Rivers S. and Roehl R. Managing skin damage in the frail elderly using a novel clear absorbent acrylic dressing, 2005
- 2. Dyble, T. Poster 3M Acrylic dressing for the treatment of skin tears & friction burns. TVS conference April 2009
- 3. Barker, A. Poster Case study: Treatment of a skin tear using a clear acrylic wound dressing. EWMA conference May 2009
- 4. McInnes W (2007). A clear solution. New absorbent acrylic wound technology. White paper.
- Graham K, Lloyd-Jones R & Evans A, (2009) There's no messing with this dressing! Using 3M™ Tegaderm™ Absorbent Dressing for managing pre-tibial lacerations in the Nursing Home setting. Poster presentation Wounds UK Conference, November 2009.
- 6. Simon, D (2009). The management of a sacral pressure ulcer using an absorbent clear acrylic dressing. Poster presentation Wounds UK conference, November 2009
- 7. 3M data on file
- 8. Robertson K et al. (2006). Skin Tear Management: Soft Silicone Mesh vs Clear Acrylic Dressing. Poster presentation at CAWC, Ottawa, Canada 2006.
- 9. Schimmelpfenning, D and Mollenhauer, S. 2006 Use of a Clear Absorbent Acrylic Dressing for Debridement. Journal of Wound, Ostomy and Continence Nursing. November/December 2006. Vol. 33 No. 6 pp.639-643.

*laboratory testing has proven that the film provides a barrier against HIV-1 and HBV while the dressing remains intact without leakage.

Images of Category 1 skin tears reproduced with kind permission from P. Beldon. Best practice for the assessment and management of superficial skin tears. Wound Essentials. Vol. 1. 2006.

^{**} Photograph is not of actual patient featured in the case study.

^{10.} Payne, R.L & Martin, M.C (1993) Defining and classifying skin tears: need for a common language. Ostomy Wound Management 39(5): 16-26.

3M™ Tegaderm™ Absorbent Clear Acrylic Dressing



Ordering information

	Order No.	NHS code	PIP Code	Size of acrylic pad	Total size	Dressings/ box
	90800 oval	EKH023	346-6224	3.8 x 5.7cm	7.6 x 9.5cm	5
	90801 oval	EKH024	346-6349	6.0 x 7.5cm	11.1 x 12.7 cm	5
	90802 square	EKH025	353-5796	10.1 x 10.1cm	14.9 x 15.2cm	5
	90803 oval	EKH022	346-6273	8.5 x 10.7cm	14.2 x 15.8cm	5
	90805 square	EKH027	353-5812	14.9 x 15.2cm	20.0 x 20.3cm	5
9	90807 sacral	EKH026	353-5804	11.6 x 14.5cm	16.8 x 19.0cm	5



3M™ Cavilon™ Skin Care Products

Use Cavilon No Sting Barrier Film to protect fragile skin and also apply around wounds for long-lasting protection.

www.3M.co.uk/medical

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