DRESSING CATEGORIES

	Form and Function	When to Use/Not Use	Advantages	Disadvantages
Gauze Dressings ▪ Abd Pads ▪ Nu gauze ▪ 2x2 ▪ 4x4 ▪ Kling or Kerlix	▪ Gauze dressings come in a variety of weaves, shapes and sizes. ▪ Most often used to fill dead space, for wet to dry debridement and as a secondary cover dressing. ▪ Sterile Kerlix should only be used for packing- otherwise Kling would be recommended.	**Use for:** ▪ Filling dead space/cavities ▪ As a secondary dressing	▪ Less costly than other dressings for frequent dressing changes. ▪ Easy to apply.	▪ Wet to dry gauze dressings are non-selective when debriding and may cause pain and trauma to healthy granulation tissue. ▪ Packing too tightly may cause damage to the wound bed.
Hydro Gels ▪ Duoderm Gel (ConvaTec) ▪ Granugel (ConvaTec) ▪ Intrasite Gel (Smith & Nephew) ▪ Hypergel (Molynlycke) ▪ Normlgel (Molynlycke) ▪ Restore Hydrogel Dressing (Hollister) ▪ Tegaderm Hydrogel (3M) ▪ Tegagel (3M)	▪ Hyrdrogels are excellent for maintaining or creating a moist environment. Some gels provide absorption desloughing and debriding capabilities. Gels hydrate eschar and slough by increasing the moisture at the wound site. ▪ They are available in a tube or applipak. ▪ Contains 80-99% water	**Use for:** ▪ Providing and maintaining a moist wound environment to reduce eschar formation and create an environment for fast, safe, painless healing. ▪ Effective cleansing/debridement of necrotic and sloughy wounds by increasing moisture content and aiding the natural autolytic processes of the body. ▪ Re-epitheliazing wounds with minimal exudate. ▪ Abrasions, minor burns, and other minor wounds. ▪ Partial and full-thickness wounds. ▪ Pressure ulcers. Surgical wounds. ▪ Venous and diabetic ulcers. **Do not use for:** Wounds with large amounts of exudate.	▪ Conformable and cover sensitive nerve endings. ▪ They are very effective in hydrating wound surfaces and liquifying necrotic tissue on the wound surface (autolytic debridement) ▪ Hydrogels will not prevent natural contraction of the wound. ▪ They are easy to use and require no mixing or preparation. ▪ Gels are non-adherent and can be removed from the wound without harming fragile granulation tissue or causing unnecessary discomfort. ▪ Can be used in infected wounds and in cavities/tunnels ▪ Can be left on 24-72 hours	▪ Hydrogels require secondary dressings. ▪ They absorb only minimal exudates. ▪ Hydrogels are difficult to keep in place on superficial wounds.
Hydrocolloid Dressings ▪ DuoDerm CGF/ Extra/Signal or Thin (Convatec) ▪ Comfeel Ulcer (Coloplast) ▪ Tegasorb (3M) ▪ Restore Hydrocolloid Dressing (Hollister) ▪ Tegaderm Hydrocolloid (3M)	▪ Hydrocolloids are occlusive and adhesive wafer dressings, which combine absorbent colloidal materials with adhesive elastomers to manage light to moderate amounts of wound exudate. ▪ Most hydrocolloid dressings react with wound exudate to form a gel-like covering, which protects the wound bed and maintains a moist wound environment. ▪ Hydrocolloids are available in various shapes/sizes.	**Use for:** ▪ Dressing of granulating and epitheliazing wounds that are draining low to moderate amounts of exudate. ▪ Promote autolytic debridement. ▪ Partial and full-thickness wounds. ▪ Pressure ulcers. ▪ Surgical wounds. ▪ Venous and diabetic ulcers. ▪ Necrotic wounds with minimal exudate. **Do not use for:** Wounds with large amounts of exudate.	▪ Waterproof and prevent bacterial and environmental contamination. ▪ Comfortable for easy application and may reduce pain at the wound site. ▪ Do not require a secondary dressing. ▪ May be left in place for up to 7 days-long wear time	▪ Moderately to heavily exuding wounds will overwhelm hydrocolloid dressings often within a day. ▪ Hydrocolloids are impermeable to oxygen and are not recommended for dressing wounds with suspected or known infections. ▪ Some hydrocolloids break down, and removal of the residue from the wound can sometimes be time consuming. It is not necessary, however, to remove this entire residue before redressing the wound. ▪ Odor upon removal of the dressing is frequently unpleasant.

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Transparent Films ▪ Bioclusive (Systagenix) ▪ OpSite (Smith & Nephew) ▪ IV 3000 (Smith & Nephew) ▪ Tegaderm Film (3M)	▪ Transparent adhesive films are semi-permeable membrane dressings that are waterproof yet permeable to oxygen and water vapor. ▪ They prevent contamination of the wound by exogenous bacteria. ▪ They maintain a moist wound environment, facilitate cellular migration and promote autolysis of necrotic tissue by trapping moisture at the wound surface. ▪ Transparent films are available in various sizes.	**Use for:** ▪ Superficial wounds. ▪ Wounds with light exudate. ▪ Wounds on elbows, heels, flat surfaces. ▪ Covering blisters. ▪ Retention of primary moist healing dressings (secondary dressing). ▪ To protect skin from feces/urine. ▪ Covering venous access devices. **Do not use for:** ▪ Heavily exudating wound. ▪ Moist coccyx dressings.	▪ Transparent films permit evaluation of wound progress without removal of dressing. ▪ They are waterproof and gas permeable. ▪ Transparent films maintain a moist environnent. ▪ They are economical. ▪ Conformable. ▪ Promote autolytic debridement. ▪ Prevention/reduces friction.	▪ Transparent films are adhesive and can tear healthy skin if improperly removed, especially in elderly patients with thin, fragile skin. ▪ They are non-absorptive and will be overwhelmed by exuding wounds. ▪ They tend to roll off wounds in high friction areas such as the coccyx.
Alginates ▪ Algisite (Systagenix) ▪ Comfeel Seasorb (Coloplast) ▪ Kaltostat (Convatec) ▪ Melgisorb (Molnlyke) ▪ Restore Calcium Alginate (Hollister)	▪ Alginates are made of soft non-woven fibers derived from brown seaweed. ▪ Alginates absorb wound exudate and form a moisture vapor-permeable, gel-like covering over the wound, maintaining a moist wound environment. ▪ The alginates absorb many times their own weight. ▪ The capacity to absorb is directly related to the amount of weight or alginate applied to the wound. ▪ They are available as wound pads and ropes for packing of deep cavity wounds.	**Use for:** ▪ Wounds with moderate to heavy wound exudate or **bleeding**. ▪ Granulating and epithelializing wounds where some exudate is present – ie. Venous leg ulcers. ▪ Partial and full-thickness wounds. ▪ Pressure ulcers. ▪ Surgical wounds. ▪ Venous and diabetic ulcers. **Do not use for:** ▪ Wounds with little or no exudate.	▪ Highly absorbent. ▪ Have a haemostatic effect. ▪ The rope presentation is easy to apply. ▪ Can be used on infected wounds with high exudate. ▪ Reduces the frequency of changes (wear time 2-7 days depending on exudate). ▪ Conformable – useful in packing highly exudating cavity wounds (**where the wound bed is visible**).	▪ Alginates always require a secondary dressing. ▪ There is a risk of drying the wound bed with alginates; therefore, they are not recommended for wounds with low volumes of exudate. ▪ In dry wounds, fibers will separate/stick on wound bed. ▪ Contraindicated for third-degree burns, dry eschar and surgical implantation. ▪ Do not use for packing a wound which the wound bed is not visible (tunnels, sinus tracts). Fibers may break and stay into the wound. ▪ May have an odor during dressing changes.
Hydrofibre Dressings ▪ Aquacel (Convatec)	▪ Hydrofibre dressings are non-woven pad or ribbon dressings composed of hydrocolloid fibers (sodium carboxymethylcellulose). ▪ They are highly absorbent; absorb exudate and create a soft gel that maintains a moist wound environment.	**Use for:** ▪ Acute or chronic wounds with large amounts of exudate. ▪ Partial and full-thickness wounds ▪ Pressure ulcers. ▪ Donor sites. ▪ Surgical wounds. ▪ Venous and diabetic ulcers. **Do not use for:** Wounds with little or no exudate.	▪ Highly absorbent. ▪ Conformable – useful in packing highly exudating cavity wounds (**where the wound bed is visible**). ▪ Reduces the frequency of changes (wear time 2-7 days depending on exudate).	▪ Require a secondary dressing. ▪ Do not use on light or moderately exudating wound as may dry out wound bed. ▪ Do not use for packing a wound which the wound bed is not visible (tunnels, sinus tracts). Fibers may break and stay into the wound.

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Foam Dressings ▪ Allevyn (Smith & Nephew ▪ Biatain (Coloplast) ▪ Lyofoam (Convatec) ▪ Mepilex (Border) (Molnlycke) ▪ Microfoam (3M) ▪ Restore Foam Dressing (Hollister) ▪ Tegaderm Foam (adhesive/ nonadhesive) (3M) Tielle (Systagenix)	▪ Foam dressings are highly absorbent dressings generally made from hydrophilic polyurethane foam. ▪ The high-absorbency of foam dressings allow you to prolong the interval between dressing changes, while still maintaining a moist wound environment. ▪ Foam dressings that hold exudate off the wound and peri-wound skin surface reduce maceration. ▪ Some foam dressings are waterproof and aid in the prevention of bacterial contamination. ▪ Some may be self-adhesive.	**Use for:** ▪ Heavily exuding wounds ▪ Deep cavity wounds – as a cavity filler to absorb exudate and maintain a moist environment. ▪ Partial and full-thickness wounds. ▪ Pressure ulcers. ▪ Surgical wounds. ▪ Venous and diabetic ulcers. **Do not use for:** ▪ Wounds with little or no exudate	▪ Comfortable and conform to wounds. ▪ Very absorbent, can be left in place for up to 7 days. ▪ Won't stick to the wound or harm viable tissue. ▪ Leaves the wound bed clean after removal – no dressing residue or breakdown. ▪ Non-adhesive versions are useful when the surrounding skin is friable or if the surrounding skin is sensitive ▪ Absorb and hold exudate away from the wound surface, decreasing maceration. ▪ Frequency of dressing changes depends on amount of drainage (3-5 days).	▪ May require a secondary dressing, if not auto-adhesive. ▪ They may dry the wound if there is little to no exudate. ▪ May macerate periwound area if not changed appropriately. ▪ Not all foams can be used on infected wounds (check package insert)/
Non-Adherent Dressings ▪ Adaptic (Johnson & Johnson) ▪ Jelonet (Smith & Nephew) ▪ Mepitel (Molnlyke) ▪ Telfal (Kendall) ▪ Wound Contact Layer (3M) ▪ Sofratulle (By Rx) ▪ Bactigras (Smith & Nephew) Tegaderm	▪ Non adherent dressings are either impregnated or non-impregnated. ▪ Impregnated dressings are woven mesh and may contain vaseline, silicone or antibiotics. ▪ Non impregnated dressings are silicone or plastic coated. Antimicrobial Properties (requires prescription) Antimicrobial Properties (Chlorhexidine)	**Use for:** ▪ Lacerations/abrasions/skin tears. ▪ Mepitel is used for malignancy tumors (or any other partial/full thickness wound) which easily bleeds and very painful. Mepitel is changed every 7 days. Mepitel is left on the wound during cleansing, can place hydrogel or medicated creams on top of Mepitel and they will pass through onto the wound as well as exudate. **Do not use for:** ▪ Heavily exudating wounds.	▪ Minimizes adherence.	▪ May promote maceration.

	Form and Function	When to Use/Not Use	Advantages	Disadvantages
Anti-Bacterial Dressings ▪ Iodosorb Cadexomer Iodine (Smith & Nephew) ▪ Acticoat (Smith & Nephew) ▪ Aquacel AG (Convatec) Silver Cel (Systagenix) ▪ Actisorb (J&J)	▪ In helping to control the bio-burden and removing exudate, an ideal wound environment is created to help bring about wound closure. ▪ Iodosorb dressings clean by absorbing fluids, removing exudate, pus and debris, while introducing an antibacterial (slow release iodine) component into the wound. ▪ Iodosorb comes in paste and ointment. ▪ Acticoat is a nonocrystalline silver and delivers silver directly into the wound bed. It can bind with sodium so wounds must be cleansed with water. It has no absorbent properties. ▪ Aquacel AG and Actisorb are ionic silver and do not deliver silver into wound but kill bacteria after it is absorbed by dressing. Both aquacel and actisorb are absorbent dressings. Actisorb also has charcoal in it and will decrease odor.	**Use for:** ▪ For all types of pressure ulcers, diabetic foot ulcers, surgical wounds and leg ulcers with moderate to high exudate and burns. ▪ To reduce bacterial burden to colonized, chronic nonhealing wounds.	▪ Cadexomer iodine is an effective deslougher. ▪ Decreases bacterial load. ▪ Highly absorbent. ▪ Reduces offensive odours. ▪ Broad spectrum.	▪ Often require a secondary dressing. ▪ Acticoat dressings require constant re-moistening with water. ▪ Should be used short-term ONLY. ▪ Some individuals are sensitive to silver. ▪ Secondary dressing required. ▪ Not recommended for use in conjunction with topical medications. ▪ Incompatible with oil based products, including petroleum jelly.
Odor Control ▪ Carbonet (Systagenix) ▪ Restore Odor Absorbant Dressings (3M)	▪ Come in various sizes to absorb moderate to large amounts of exudate and decrease odor associated with exudates and anaerobic bacteria	▪ Any type of exudating, odorous wound	▪ Controls odor	▪ Cannot be cut to smaller size
Combination Dressings ▪ Combiderm (Convatec) ▪ Alldress ▪ Mepore (Molnlycke) ▪ Primapore (Systagenix)	▪ Combine two different advanced wound care products (ie. hydorocolloid and foam).	▪ Low to moderately exudating wounds. ▪ Partial and full-thickness wounds. ▪ Pressure ulcers. ▪ Surgical wounds. ▪ Venous and diabetic ulcers.	▪ Balance moisture in wound ▪ Waterproof and prevent bacterial and environmental contamination. ▪ Conformable. ▪ Easy to apply and remove. ▪ Frequency of dressing change dependent on wound type and amount of exudate.	▪ Cannot be used for highly exudative wounds. ▪ Adhesive borders may limit use on fragile skin. ▪ Not all dressings may provide moist wound therapy (check package insert).
Other ▪ Tegaderm Absorbant (3M)	▪ Acrylic dressing can be left in place for up to 30 days	▪ Excellent for skin tears and small minimally exudating wounds	▪ Can see through it so no need to remove/replace ▪ Cost effective as can remain in place for 30 days or until wound is healed for small wounds and skin tears	▪ Cannot be used for highly exudative wounds

Gauze Dressings

Hydro Gels

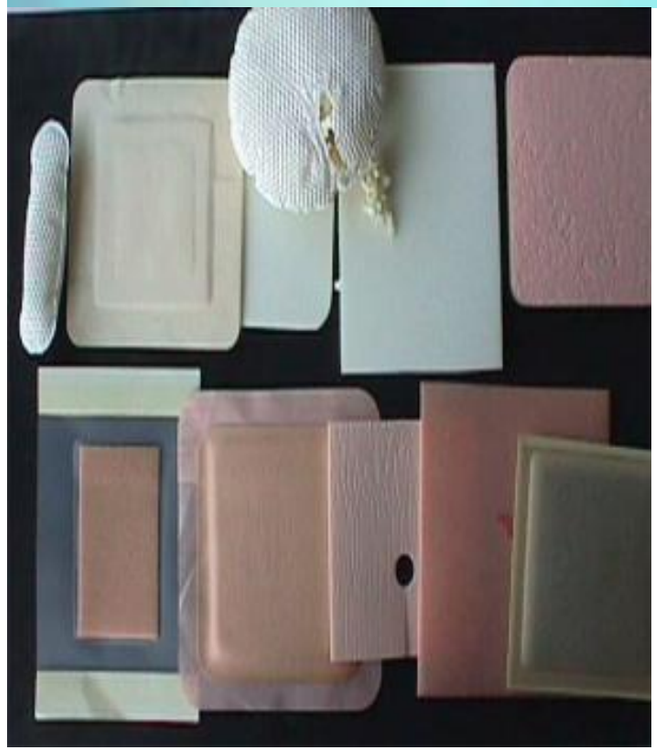
Hydrocolloid Dressings

Transparent Films

Alginates

Hydrofibers

Foam Dressings

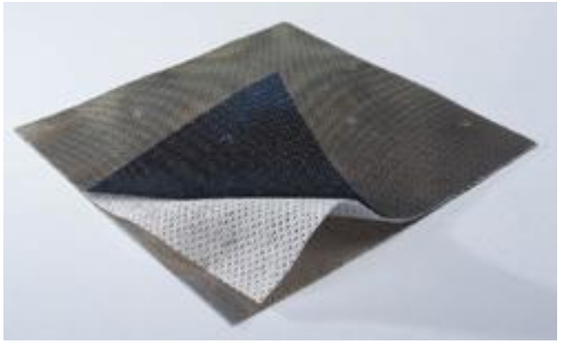


Non-Adherent Dressings

Anti-Bacterial Dressings

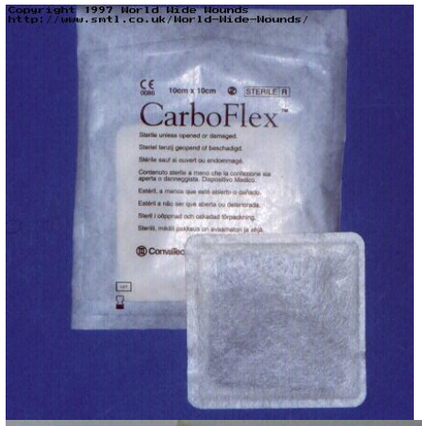
IODOSORB

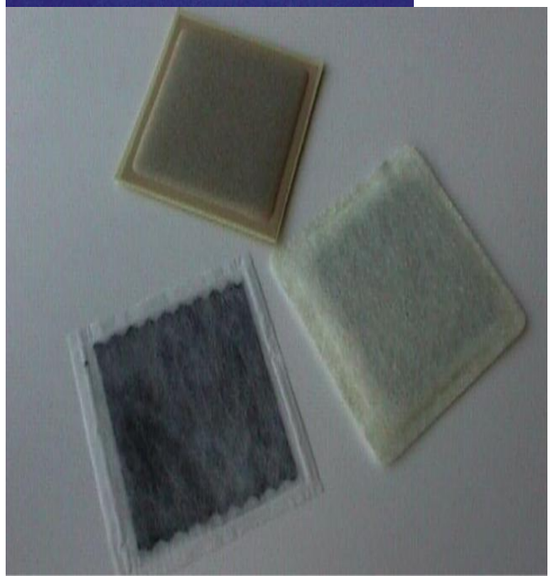
ACTICOAT



AQUACEL AG

Odor Control





Combination Dressings