















Skin and Wound Product Information Sheet

Duoderm Extra Thin		
Classification	Cover Dressing: Hydrocolloid - Thin Non-Border	
Key Points	Composed of cellulose, pectin and and gelatine; provides an occlusive, moist environment	
Indications	For wound with small amounts of exudate	
	As a protective dressing for reddened skin or superficial skin breakdown	
	May be used as a protective peri-v	wound border with Negative Pressure Wound Therapy
	(NPWT) dressings or dressings sec	ured with tape that require frequent dressing changes
Precautions	• N/A	
Contraindications	Do not use for wounds with mode	rate to large amounts of exudate
	Do not use on untreated clinically-	infected wounds
Formats & Sizes	Non border dressing	
	■ 5 x 10 cm	
	■ 5 x 20 cm	
	■ 7 x 7 cm	
	■ 10 x 10 cm	
Application Directions		Rationale
Cleanse/irrigate wound with sterile normal saline or agency		Reduces wound debris and allows for adhesion of
approved wound cleanser; dry peri-wound skin.		dressing or tape.
If required, apply skin barrier to peri-wound skin.		To protect the peri-wound skin from maceration and to
		improve the adhesion of the dressing or tape.
To Apply		
Peel back the clear cover on adhesive side of dressing.		
Apply to wound with a 3cm overlap onto intact skin. Dressing		An overlap onto intact skin is required for adherence and
may be cut.		wear time to be achieved.
Smooth edges on to peri-wound skin and hold hand over dressing for a few minutes.		Dressing adheres best when it is warm and gentle
To Remove		pressure is applied to the edges of the dressing.
Remove dressing by lifting an edge and pulling it in a lateral		To minimize the trauma to the peri-wound skin.
motion (away from the wound), do not pull up on the		To minimize the trauma to the peri wound skin.
· · · · ·	adhesive remover may also be used.	
Frequency of Change	,	
Will depend upon amount of exudate. Dressing should be		
changed at 5-7 days.		
Expected Outcome		
Exudate is managed with no peri-wound skin maceration.		

For further information, please contact your Wound Clinician.