















Skin and Wound Product Information Sheet

Mepilex Border Post-Op		
Classification	Surgical Cover Dressing: Composite	
Key Points	A multilayer, absorbent, vapour-permeable wide	ose/polyester flex cut-pad which contains super- stretching; bacterial/viral proof listering, and allows dressing to be safely removed
Indications	For post-op surgical incision with small to moder	ate amounts of exudate (serous or blood)
Precautions		vent dressing from adhering properly ents such as sodium hypochlorite, hypochlorous acid or skin is thoroughly dry before applying the dressing
Contraindications	, , ,	
	Do not use on untreated clinically-infected wour	ds
Formats & Sizes	 Border dressing 6 x 8 cm 9 x 10 cm 9 x 15 cm 10 x 20 cm 10 x 25 cm 10 x 30 cm 10 x 35 cm 	SafetaC Tromotop
	Application Directions	Rationale
	peri-incision skin with sterile normal saline or und cleanser; dry peri-incisional skin.	Reduces wound debris and allows for adhesion of dressing or tape.
If a sodium hypochlorite or hypochlorous acid cleanser was used, ensure that the peri-wound skin is thoroughly dry before apply the dressing.		To avoid irritation to the peri-wound skin.
To Apply		
If applying to an incision over a joint e.g. a knee, bend the joint to 30° prior to applying the dressing.		To ensure that joint can be flexed once dressing is on.
Use the three-part release system (middle, smaller and larger release films) to remove the backing of the dressing: Remove the middle part of the release film and apply to appropriate section of the incision line Slowly remove the larger release film and apply the dressing to the incision area as the release film Is removed Repeat with the smaller release film		
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Created by the British Columbia Provincial Nursing Skin & Wound Committee in collaboration with the NSWOCs/Wound Clinicians from

















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Expected Outcome		
Incisional exudate (serous & blood) is managed.		
Peri-incisional skin does not become macerated.		
For further information, please contact your NSWOC/Wound Clinician.		