

Vancouver CoastalHealth Promoting wellness. Ensuring care

Providence





NU-DERM Hydrocolloid		
Classification	Cover Dressing: Hydrocolloid	
Key Points	 A hydrocolloid adhesive with an top layer of semi-permeable polyurethane film with a tapered border Dressing is waterproof 	
Indications	For shallow healing wounds with small amounts of exudate	
Precautions	• N/A	
Contraindications	• Do not use on wound with moderate to large amounts of exudate	
	• Do not use on wounds with exposed muscle, tendon or bone	
	 Do not use on untreated clinically-infec Do not use on 3rd degree burns 	ted wounds
Formats & Sizes	 Tapered border 5 x5 cm 10 x 10 cm 15 x 15 cm 	
Ар	plication 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 a skin barrier to the peri-wound skin.		To protect the peri-wound skin from maceration and to improve the adhesion of the dressing or tape
To Apply		
Choose appropriate dressing size so at least 2.5cm of the pad extends beyond the wound edge on all sides.		Incorrect sizing will adversely affect dressing function.
Carefully remove the large piece of protective backing from the dressing.		Too much handling will decrease the adhesion.
Apply the dressing, ce small protective backi	ntering it over the wound; remove the ng paper.	
Smooth the dressing from the center outward.		To ensure that the dressing is adhering will to the peri- wound skin.
To Remove		
Lift edges and gently pull in direction of the hair growth		To minimize trauma to the peri-wound skin.
		It is normal for the drainage to have a purulent-like appearance. A foul odor may also be noted but will disappear after cleansing.
Frequency of Dressing		
Will depend upon the amount of exudate. Change the dressing every 5-7 days or when exudate reaches to 1cm of the edge of the dressing.		If there is leakage after within 3 days, consider a more absorbent type of dressing.
Expected Outcome		
Exudate is managed w	vith no peri-wound skin maceration.	
	For further information, please co	ontact your Wound Clinician.