















Skin and Wound Product Information Sheet

TIELLE NON-ADHESIVE		
Classification Cover Dressing: Hydropolymer Foam		
Key Points	 A non-border hydropolymer dressing composed of three layers: a wound contact layer, a superabsorbent foam layer and a polyurethane film backing Flexible Can be cut to shape Needs to be secured May be used as a primary or secondary dressing 	
Indications	 For wounds which have small to large/copious exudate May be used under compression wraps 	
Precautions	May be used on wounds with S&S of infection when the infection is being treated	
Contraindications	Do not use on lesions with active vasculitisDo not use on full thickness burns	
Formats & Sizes	 Dressing 5 x5cm 10 x 10cm 15 x 15cm 17 x 17cm 21 x 22cm 	September 1997 TIELE NON ADHESIVE NON ADHES
	pplication Directions	Rationale
Choose a dressing which will ensure at least a 1cm overlap		
onto the peri-wound skin. Cleanse the wound/peri-wound skin with at least 100ml of sterile normal saline or agency approved wound cleanser; dry peri-wound skin. If required, apply skin barrier to peri-wound skin.		Reduces wound debris and allows for adhesion of dressing or tape. To protect the peri-wound skin from maceration and to
		improve the adhesion of the dressing or tape.
To Apply		
If needed, cut dressing to fit wound area. Partially peel off the backing paper. Position the dressing on the wound and ensure that there is 1cm overlap on the periwound skin. Remove remaining backing paper, smooth into place and		
secure with tape or Kling/tape.		To hold dressing in place.
To Remove		
Gently remove tape or Kling/tape and lift one corner of the dressing and remove dressing.		To minimize trauma to the peri-wound skin.
Frequency of Dressing Change		
Change the dressing when the exudate is within 1cm of the edge of the foam. Do not allow exudate to accumulate under the backing.		
Depending upon the amount of exudate, the dressing may be left in place for up to 7 days.		
Expected Outcome Exudate is managed with no peri-wound skin maceration.		
For further information, please contact your Wound Clinician.		