




## Skin and Wound Product Information Sheet

<b>Aquacel Ag+ Extra</b>	
<b>Classification</b>	<b>Antimicrobial: Silver Hydrofiber</b>
<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Contains two specific agents (ethylenediaminetetraacetic acid (EDTA) and benzethonium Chloride (BC)) for the disruption of biofilm and ionic silver to manage bacteria (aerobes, anaerobes, Antimicrobial Resistant Organisms (AROs) and yeasts; this combination reduces biofilm reformation</li> <li>• Two layers of sodium carboxymethyl-cellulose fibrous sheets are stitched together for extra absorbency and strength when saturated</li> <li>• When in contact with moisture will transform into a soft gel pad when conforms to the wound bed and is highly absorbent</li> </ul>
<b>Indications</b>	<ul style="list-style-type: none"> <li>• Wounds with moderate to heavy exudate which show signs and symptoms of infection and/or suspected biofilm</li> <li>• May be used prophylactically to prevent infection in clients who are at high risk for developing a wound infection</li> </ul>
<b>Precautions</b>	<ul style="list-style-type: none"> <li>• N/A</li> </ul>
<b>Contraindications</b>	<ul style="list-style-type: none"> <li>• Do not use for client with known sensitivity to silver or sodium carboxymethylcellulose</li> <li>• Do not use silver ionic products in combination with oil-based products such as petrolatum or paraffin</li> <li>• Do not use silver products when client is undergoing MRI examination or during radiation therapy (dressing can be replaced after MRI or radiation treatment is completed)</li> </ul>
<b>Formats &amp; Sizes</b>	<ul style="list-style-type: none"> <li>• Sheet                             <ul style="list-style-type: none"> <li>▪ 5 x 5 cm</li> <li>▪ 10 x 10 cm</li> <li>▪ 15 x 15 cm</li> <li>▪ 20 x 30 cm</li> </ul> </li> <li>• Ribbon                             <ul style="list-style-type: none"> <li>▪ 1 x 45 cm</li> <li>▪ 2 x 45 cm</li> </ul> </li> </ul> <div style="text-align: right; margin-top: 10px;">  </div>
<b>Application Directions</b>	
Cleanse/irrigate wound with sterile normal saline or agency approved wound cleanser; dry peri-wound skin.	Reduces wound debris and allows for adhesion of dressing or tape.
If required, apply skin barrier if needed.	To protect the peri-wound skin from maceration and to improve the adhesion of the dressing or tape.
<b>To Apply</b>	
<p>Dressing may be cut but should overlap by 1 cm onto the peri-wound skin. Cut ribbon to the desired length; <b>do not</b> cut the ribbon into a smaller width.</p> <p>Apply dry Aquacel Ag+ Extra sheet directly on the wound bed. If using multiple sheets, ensure overlapping by at least 1 cm on all sheet edges. Aquacel Extra may be layered on top of Aquacel Ag+ Extra for highly exuding wounds.</p> <p>For packing: lightly pack one piece (where possible) of ribbon into cavity, undermining or sinus tract. Leave a tail of the ribbon so that it can easily be seen.</p>	<p>Overlapping allows for shrinkage of product as it absorbs exudate and prevents areas of the wound from being exposed during movement.</p> <p>Cutting the ribbon into a smaller width diminishes its tensile strength.</p> <p>Over-packing undermining or sinus tracts can lead to tissue necrosis. The tail will facilitate the removal of packing.</p>
Apply appropriate cover dressing to maintain a moisture-balanced wound environment.	The choice of cover dressing is depended upon the amount of exudate expected.



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<b>To Remove</b>	
Aquacel Ag+ Extra will have turned to a gel and have taken on the colour of the exudate. Using forceps remove Aquacel Ag+ Extra in one piece and cleanse wound bed to ensure residual gel is removed.	The dressing will have formed a non-adherent gel which assists with less painful dressing changes. If the Aquacel Ag+ Extra is adhered to wound bed, reassess the choice of cover dressing.
<b>Frequency of Change</b>	
Will depend upon the amount of exudate. Can be left for up to 7 days.	
<b>Expected Outcome</b>	
S&S of infection are resolved within 2 weeks.  If used prophylactically, wound infection does not occur.  Exudate is managed with no peri-wound skin maceration.	
<b>For further information, please contact your Wound Clinician.</b>	