




Skin and Wound Product Information Sheet

IoPlex	
Classification	Antimicrobial: Iodine – Iodophor
Key Points	<ul style="list-style-type: none"> • Pre-moistened, Iodophor impregnated polyvinyl alcohol (PVA) absorbent foam dressing. • Provides controlled release of iodine over 24 to 72 hours. • Promotes autolytic debridement. • Kills bacteria and promotes a clean wound environment. • Colour changes from blue/black to off-white as iodine is released. • Requires secondary (cover) dressing.
Indications	<ul style="list-style-type: none"> • Sloughy wounds with moderate to heavy exudate. • Wounds with signs and symptoms of infection. • Dry wounds with non-viable tissue if moisture balance can be maintained (e.g. hydrogel). • Wounds with hypergranulation. • Can be used under compression. Apply a secondary dressing if using viscopaste as there is no data supporting safety with Zinc in direct contact with IoPlex. • Safety in pediatric populations has not been established and its use is left to physician discretion. Care should be taken when using on children 6 months to 14 years, especially with large wounds.
Precautions	<ul style="list-style-type: none"> • Total amount of IoPlex used in one week must not exceed 71 cm² total dressed surface area (equivalent to 28-5 x 5 cm dressings, 6-4 x 5 cm dressing or 3-15 x 15 cm dressings). Total amount of IoPlex used in a single application is to not exceed one-third of the above limitations. • Should not exceed 3 months continuous use in any single course of therapy. • May experience burning/stinging sensation in the first 60 minutes after application.
Contraindications	<ul style="list-style-type: none"> • Those with known allergy or sensitivity to any of the product ingredients. • Should not be used for those who are pregnant or lactating. • Avoid using before and after radio-iodine diagnostic tests. • Make Physician/NP aware of iodine usage for clients: <ul style="list-style-type: none"> • Prescribed lithium as Ioplex may increase the possibility of hypothyroidism when used in combination with lithium. Blood work should be monitored on a regular basis. • With renal impairment, as poor renal function is thought to be a factor in increased iodine levels in serum and urine with prolonged use and use in large wounds. • With thyroid disorders as they are more susceptible to thyroid metabolism changes in long-term therapy. Thyroid function should be monitored if large areas are being treated for a prolonged period of time.
Formats & Sizes	<ul style="list-style-type: none"> • 5.1 x 5.1 cm • 10.2 x 12.5 cm • 15 x 22 cm <div style="text-align: right;">  </div>
Application Directions	
Cleanse/irrigate wound with sterile normal saline or agency approved wound cleanser (including Anasept, Vashe and Chlorhexidine).	Reduces wound debris.
Gently blot excess fluid in wound and leave wound bed slightly damp. Dry periwound skin.	Compatible with antimicrobial wound cleansers.
If required, and appropriate for cover dressing, apply barrier film to periwound skin. Refer to the cover dressing's Product Information Sheet to determine if barrier film is appropriate.	Improves adhesion of dressing or tape.
	To protect periwound skin from moisture associated skin damage and medical adhesive related skin injury. Barrier film may interfere with the function of some silicone cover dressings.
To Apply	
If IoPlex has dried out, remoisten with sterile normal saline or water and wring out.	IoPlex is pre-moistened but will dry out if removed from foil package.



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Application Directions	Rationale
<p>Cut dressing to fit size and shape of wound. Do not cut foam directly over wound and remove any fragments left after cutting dressing. May be folded or layered to fit and fill dead space.</p>	<p>To avoid dressing fragments falling into the wound. Minimize overlap onto skin to prevent over drying.</p>
<p><u>For dry wounds:</u></p> <ul style="list-style-type: none"> Moisten the dressing with sterile saline or sterile water and squeeze out the excess fluid, and Consider applying Hydrogel to wound bed. 	<p>IoPlex requires moisture to release iodine.</p>
<p>Place the foam in contact with the wound surface. It may be appropriate to overlap the wound margins to cover the periwound skin if skin is erythematous or inflamed.</p> <p>Up to 3 layers of IoPlex can be applied if wound has depth or if using under compression. Consider depth of wound and/or anticipated amount of wound exudate to determine number of layers.</p>	<p>Either side of dressing may be in contact with wound bed.</p> <p>To fill dead space and to increase absorbency.</p>
<p><u>For undermining, sinus tracts or tunnels:</u></p> <ul style="list-style-type: none"> Foam may be folded or layered to fill undermining or large sinus tracts or tunnels. DO NOT tightly pack or force foam into the wound. Foam may be cut into strips. Do not cut strips narrower than 1 cm. The width of the strip should fill the sinus tract or tunnel but NOT be tightly packed. Lightly pack with one piece of foam strip. Leave a tail of the foam strip so that it can be easily seen. 	<p>Over-packing undermining or sinus tracts can lead to tissue necrosis.</p> <p>Over-packing sinus tracts or tunnels can lead to tissue necrosis.</p> <p>The tail and strip wider than 1 cm will facilitate the removal of packing.</p>
<p><u>For wounds under compression</u>, up to 3 layers of IoPlex may be stacked.</p> <p>Apply secondary dressing if using viscopaste.</p>	<p>Consider anticipated amount of wound exudate to determine number of layers to use.</p> <p>There is no data supporting safety with Zinc in direct contact with IoPlex</p>
<p>Apply appropriate secondary (cover) dressing to keep IoPlex soft and moist.</p> <p>If the dressing and/or wound bed is too dry, IoPlex will become stiff and fail to work. Rehydrate the dressing until damp using sterile water or saline.</p>	<p>The choice of secondary dressing is dependent on amount of wound exudate expected and anticipated frequency of dressing change.</p>
<p>If using more than one piece of IoPlex, write the number of pieces in the wound on the dressing and document in chart.</p>	<p>To ensure all dressing pieces are removed at dressing change.</p>
To Remove	
<p>Gently remove foam from the wound bed and from undermining, sinus tracts or tunnels.</p> <p>If the foam has adhered to the wound bed, moisten with saline or water to soften before removal.</p>	<p>Verify all the foam pieces placed in the wound have been removed.</p>
Frequency of Dressing Change	
<p>Change single layer of IoPlex every 1-3 days or when the colour has changed to off-white. If multiple layers are used change at least every 7 days.</p>	<p>The colour of the dressing changes as the Iodine is released.</p>
Expected Outcome	
<p>Signs and symptoms of wound infection resolve within 2 weeks.</p> <p>Wound infection does not occur when used prophylactically.</p> <p>Product performs as expected.</p>	<p>If product does not perform as expected notify NSWOC/Wound Clinician and consider submitting a Product Concern form.</p>
For further information, please contact: NSWOC / Wound Clinician	



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