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Mepilex Transfer		
Classification	Layer: Transfer Sheet Wound Exudate	
Key Points	• A thin silicone covered foam dressing which allows for wound exudate to be vertically transferred	
•	from the wound bed into cover dressing	
Indications	• For 'difficult to dress' wounds with large amounts of exudate	
	May be used under compression wraps	
	<ul> <li>May be used as a protective layer on fungating wounds.</li> </ul>	
Precautions	<ul> <li>Very thick exudate may have difficulty transferring through the product</li> </ul>	
	• When using Mepilex dressings with oxidising agents such as sodium hypochlorite, hypochlorous acid or hydrogen peroxide, ensure that the peri-wound skin is thoroughly dry before applying the dressing	
Contraindications	<ul> <li>Do not use on untreated clinically-infected wounds</li> </ul>	
	• Do not use with skin barrier/sealants	
Formats & Sizes	<ul> <li>Sheet</li> <li>7.5 x 8.5 cm</li> <li>10 x 12 cm</li> <li>15 x 20 cm</li> <li>20 x 50 cm</li> </ul>	
		12
Application Directions		Rationale
Cleanse the wound and peri-wound with sterile normal saline		Reduces wound debris and allows for adhesion of
or agency approved wound cleanser. Use gauze to remove		dressing or tape.
any cleansing solution and/or debris. Dry peri-wound skin thoroughly.		
To Apply		
Cut dressing so that it overlaps dry the peri-wound skin by 5		This provides an area to secure the dressing and prevent
cm.		excoriation and maceration.
Remove the release paper and apply directly to the area, gently moulding it.		Moulding will allow dressing to remain in place more securely.
Apply appropriate cover dressing to maintain a moisture-		The choice of cover dressing is depended upon the
balanced wound environment.		amount of exudate expected.
To Remove		
Remove cover dressing and gently lift the Mepilex Transfer		To avoid trauma to the wound bed.
off the wound bed		
Frequency of Dressing Change		
Will depend upon the amount of exudate. Mepilex Transfer		
may be left in place for 7 days or an edge lifts (usually 5-7		
days). Cover dressing may be changed as needed.		
Expected Outcome		
Exudate is managed with no peri-wound skin maceration.		
For further information, please contact your Wound Clinician.		

Providence

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