



Interior Health island health northern health **Skin and Wound Product Information Sheet**

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Mepitel One		
Classification	Layer: Silicone	
Key Points	 One sided wound contact layer which conforms to body contours and does not leave a residue or dries out Allows for cover dressing to be changed as needed without disruption of the wound bed Does not stick to gloves or scissors Low potential for skin irritation/allergy Can be left in place for up to 14 days if there are no signs of infection 	
Indications	 For protection of a healing wound bed from secondary dressing For painful wounds May used in conjunction with Negative Pressure Wound Therapy (NPWT) 	
Precautions	 If used for Epidermolysis Bullosa, remove carefully as adhesion level is slightly higher than regular Mepitel If used for burns treated with meshed grafts or after facial resurfacing, imprinting of contact layer can occur; avoid unnecessary pressure upon the dressing and reposition the contact layer at least every second day If used for the fixation of skin grafts, the dressing should not be changed before the fifth day post application or as per surgeon's order 	
Contraindications	• Do not use with skin sealant/barrier	
Formats & Sizes	 Sheet 5 x 7.5 cm 7.5 x 10 cm 10 x 18 cm 17 x 25 cm 	
	Application Directions	Rationale
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.
To Apply		
Remove the release film.		To prepare dressing for application.
Apply Mepitel One, tacky side to the wound.		To ensure the correct side is to the wound.
Apply appropriate cover dressing to maintain a moisture- balanced wound environment.		The choice of cover dressing is depended upon the amount of exudate expected.
To Remove	f the wound had	To avoid trauma the wound bed.
Gently lift layer off of the wound bed		
Frequency of Dressing Change Will depend upon the amount of exudate. Mepitel One may be left on the wound for up to 14 days.		Dressing is transparent enough to allow for assessment of wound.
Reposition the contact layer at least every second day when used for burns treated with meshed grafts or after facial resurfacing.		
If using as contact layer under NWPT, then apply new contact layer with each dressing change.		
Expected Outcome		
Contact layer does no	ot adhere to wound bed.	

Providence