



* northern health island health



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Product Information Sheet

Mepore Pro			
Classification	Cover Dressing: Island Dressing		
Key Points	 Comprised of an absorbent wound pad with a non-adherent contact layer, an adhesive border with water based acrylic adhesive, and a breathable and waterproof outer film. Waterproof. Can be used as either a primary or secondary dressing. 		
Indications	 For low to moderately exuding wounds. 		
Precautions	 Do not use on fragile skin as may cause skin irritation. Has not been evaluated on pregnant/lactating individuals or neonates/infants, consult with physician/NP prior to using on these populations. 		
Contraindications	Sensitivity or allergy to acrylic adhesive or other components of the dressing.		
Formats & Sizes	 Adhesive pad 6 x 7 cm 9 x 10 cm 9 x 15 cm 9 x 20 cm 9 x 25 cm 9 x 30 cm 		

Directions	Rationale / Key Points
Selection	
Select appropriately sized Mepore Pro dressing.	Ensure absorbent pad covers the wound.
For a wound with depth, choose appropriate wound filler for amount of exudate expected and anticipated frequency of dressing change.	
Preparation	
Cleanse wound and periwound/surrounding skin with sterile normal saline or agency approved wound cleanser.	See <u>Wound Cleansing Procedure</u> or QR Code below. Barrier film may be used to protect periwound skin from moisture associated skin damage (MASD) and medical adhesive related skin injury (MARSI). Do not use moisturizers, gels or ointments on periwound /surrounding skin as these may interfere with adhesion.
Dry periwound / surrounding skin.	
If required, apply barrier film to periwound skin. Allow to thoroughly dry before applying dressing.	
Application	
For wounds with minimal depth (less than 1 cm): remove the release liners and apply sticky side to the skin without stretching. Ensure that absorbent pad covers wound.	 To protect periwound / surrounding skin from medical adhesive related skin injury (MARSI): Do not stretch dressing when applying, Do not apply under tension. Apply over joints in such a way as to not impair flexibility. Avoid using when swelling is expected in the area.
For wounds with depth (more than 1 cm): lightly fill the dead space up to skin level with appropriate wound filler. Remove the release liners and apply sticky side to the skin without stretching. Ensure that absorbent pad covers wound.	
Gently press border to ensure proper adhesion to skin.	
Removal	
Consider using adhesive remover to assist with removal.	To decrease risk of medical adhesive related skin injury.
Grasp edge of dressing and slowly peel dressing from skin in direction of hair growth.	To minimize discomfort with removal.

Created by the British Columbia Provincial Professional Practice Stream - Wound Ostomy Continence







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Directions	Rationale / Key Points		
Frequency of Dressing Change			
Change before dressing is fully saturated.	Dressing change frequency is dependent on amount of		
May be left in place for up to 7 days.	wound exudate.		
Expected Outcomes			
Exudate is managed with no periwound maceration.	If product does not perform as expected, notify		
Product performs as expected.	NSWOC/Wound Clinician and then consider submitting a <u>Supply Chain Product Concern Form</u> .		
QR Codes			
Wound Cleansing Procedure			

For further information please contact NSWOC/Wound Clinician