



Skin and Wound Product Information Sheet

PHMB/AMD Antimicrobial Foam Dressing	
Classification	Antiseptic – Polyhexamethylene Biquanide (PHMB) Foam
Key Points	<ul style="list-style-type: none"> • White polyurethane foam dressing impregnated with 0.5% PHMB designed to transfer exudate into a secondary cover dressing • Broad spectrum topical antiseptic foam dressing effective against gram positive, gram negative bacteria, (MRSA, VRE, pseudomonas) fungi and yeast for up to 7days if foam as not reached its saturation point.
Indications	<ul style="list-style-type: none"> • For wounds which show signs and symptoms (S&S) of local wound infection
Precautions	<ul style="list-style-type: none"> • N/A
Contraindications	<ul style="list-style-type: none"> • Do not use for clients with known sensitivity or allergy to PHMB • Do not use with Dakin’s Solution or bleach solutions as these solutions deactivate PHMB • Do not use as primary dressing on 3rd degree burns
Formats & Sizes	<p>Sheet</p> <ul style="list-style-type: none"> ▪ 5.1 x 5.1 cm ▪ 10.1 x 10.1 cm ▪ 10.1 x 20.3 cm ▪ 15.2 x 15.2 cm ▪ 20.3 cm x 20.3 cm ▪ 8.9 x 7.6 cm (fenestrated) <p>Disc (fenestrated)</p> <ul style="list-style-type: none"> ▪ 2.54 cm diameter, 4 mm hole ▪ 2.54 cm diameter, 7 mm hole <div style="text-align: right;">  </div>
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 and tape.
If required, apply skin barrier to peri-wound skin.	To protect peri-wound from maceration.
To Apply	
Choose a dressing size that will ensure that the dressing extends at least 5cm beyond wound edges. Dressing may be cut or notched to improve application over curves.	Incorrect sizing will adversely affect the dressing absorption functionality.
<p>If using foam sheet, apply either side directly onto wound bed. Cover with an absorbent secondary dressing.</p> <p>If using the fenestrated foam sheet or disk, apply dressing against skin around insertion site of the tube/drain/catheter; with tube/ drain/catheter tucked snugly into the star cut-out at end of T-slit. Cover with an absorbent secondary dressing if required or secure with appropriate tape or fixative wrap.</p> <p>If using the fenestrated disk, place disk around the tube/ drain/catheter; position disk on the peri-tube/drain/ catheter skin. Cover with an absorbent secondary dressing if required or secure with appropriate tape.</p>	<p>The foam sheet or disk will transfer exudate through to an absorbent secondary dressing to increase wear time for the foam. The secondary dressing must be monitored and changed when required to minimize maceration to the peri-wound skin.</p> <p>Tube/drain insertion site can be assessed and cleansed daily if required; lift dressing, cleanse and re-position.</p>
To Remove	
Carefully lift the border or tape and gently remove the dressing.	To minimize trauma to the peri-wound skin.
Frequency of Application	
May be left in place for up to 7 days. Change when dressing saturation extends to within 1 cm of dressing edge.	Frequency of change will depend on the condition of wound and amount of exudate.
Expected Outcome	
S&S of local wound infection are resolved within 2 weeks.	
For further information, please contact your Wound Clinician.	