Time to Change

The ideal wound dressing is designed to minimize the level of tissue disturbance. Too frequent dressing changes can lead to reduced temperature of the wound bed and disturbance to healing cells.1

The added benefit to an institution is a reduction in spend due to dressings being changed too often.

This guide is designed to demonstrate dressing saturation levels to guide clinicians and caregivers.



Strikethrough does not touch any edges. The dressing can remain in place.



Strikethrough has reached one edgee. The dressing can remain in place.



Strikethrough touches two edges. The dressing can remain in place.



Mepilex® Border offers up to a 7 day wear time.

Mepilex® Border is designed for superior^{2,3} fluid retention. Initial strikethrough does not necessarily mean that the dressing is saturated. The dressing was constructed to make the strikethrough visible so that you can determine when it is time to change it.

Mepilex® Border may be left in place for several days depending on the condition of wound and surrounding skin, or as indicated by accepted clinical practice.

= indication of exudate level

Time to change. The dressing is saturated when the strikethrough has reached three of the edges.

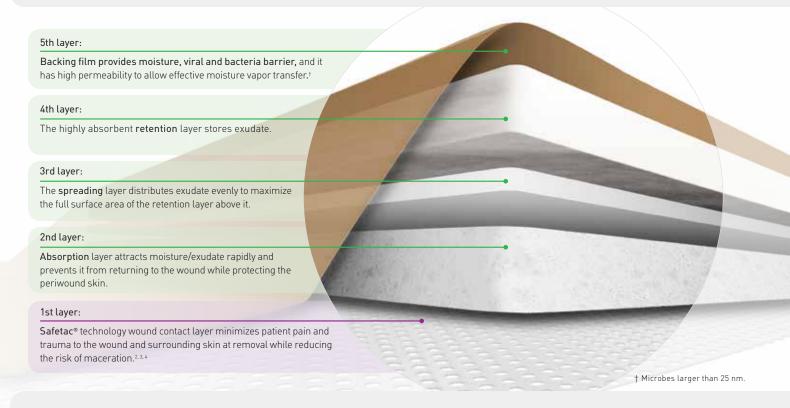
The information provided herein is not to be construed as the practice of medicine or substituted for the independent medical judgment of a patient's treating physician. Each patient's physician shall remain solely responsible for assessing the severity of patient wounds, determining the appropriate treatment, and managing treatment of the wound.



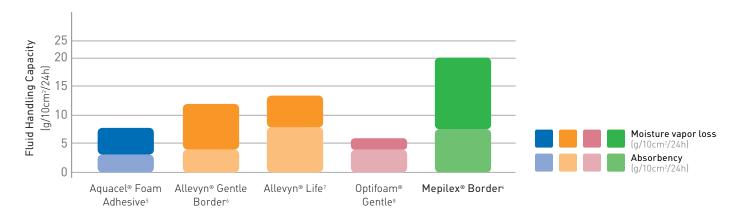




See beyond the surface



See bordered foam fluid management comparison



Mepilex® Border demonstrates superior *in vitro* values for fluid handling, maximum absorption time and initial absorption time. *In vitro* testing and peer-reviewed publications illustrate the superior fluid retention characteristics of Mepilex® Border when compared to Aquacel® Foam Adhesive, Allevyn® Gentle Border and Optifoam® Gentle.

References: 1. Taking the trauma out of wound care: the importance of undisturbed healing by M. Rippon et al. Journal of Wound Care Vol 2 1, No 8, August 2012. 2. White R. A Multinational survey of the assessment of pain when removing dressings. Wounds UK, 2008. 3. White R. et al. Evidence for atraumatic soft silicone wound dressing use. Wounds UK, 2005. 4. Wiberg A.B. et al. Preventing maceration with a soft silicone dressing: in-vitro evaluations. Poster presented at the 3rd Congress of the WUWHS, Toronto, Canada, 2008. 5. SP Tecnnical Research Institute of Sweden, Report reference FX214298-1rev1 dated 2012-07-06. 6. SMTL external lab report 10/3299/1. 7. SP Tecnnical Research Institute of Sweden, Report reference 4F014345 dated 2013-08-27. 8. SP Tecnnical Research Institute of Sweden, Report reference 4F014345 dated 2014-06-30.





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