

# ➤ **QUICK** GUIDE

## Using 3M™ Tegaderm™ High Performance Foam Adhesive Dressing in Practice



## INTRODUCTION

Foam dressings are a popular choice for exudate management and infection control. Those with silicone adhesive have become increasingly popular as a means of reducing pain at dressing change. While this remains of paramount importance, overuse of these dressings can result in increased dressing change frequency, nursing time and cost.

3M™ Tegaderm™ High Performance Foam Adhesive Dressings are a range of shaped foam dressings that are designed to fit the wound and contour to the patient. They are soft, easy to apply and remove atraumatically.<sup>1</sup> They also contain a unique moisture control layer that allows the dressing to adapt to and manage wounds with low to high exudate, increasing wear time and reducing costs.<sup>2</sup>

The following wound decision tool, developed by Victoria Peach,<sup>3</sup> helps guide the clinician to select the most appropriate foam dressing for the patient.



### References

1. Gray D et al (2011) 3M™ Tegaderm™ HP Foam Adhesive Dressing: a case report series. *Wounds UK*
2. Zehrer C et al (2011) Clinical performance studies following the improvement of an adhesive foam wound dressing. 3M Health Care, St Paul MN
3. Peach V (2012) Is it time to introduce a foam wound decision tool? Poster presentation Wounds UK, Harrogate 2013

# Flow chart for dressing selection<sup>3</sup>

Use this tool to help select the most appropriate foam dressing for the wound and patient

**Does the wound require a foam dressing as a primary or secondary dressing?**

Foams are indicated for exuding wounds and are designed to stay in place for up to 7 days

**YES**

**NO**

Refer to wound dressing formulary for alternative dressing

Has the patient been diagnosed with a long-standing dermatological condition that will be affected by standard adhesive?

Does the patient have a history of long-term steroidal use, resulting in thinning of the skin?

Does the patient have a history of allergic reaction to **more than one** adhesive dressing?

**NO** to the three questions above

Note: If the patient has had a sensitivity or allergic reaction to **one** adhesive foam, choose an alternative adhesive foam from the formulary as below

Select a **foam adhesive**

Ensure the correct size, shape and absorbency is selected from the range of products available

If the patient develops a sensitivity to an adhesive foam or shows any sign of peri-wound trauma or skin stripping, please complete an incident form. Use the decision tool to aid the next dressing choice

**YES** to one or more of the three questions above

Choose a **non adhesive foam** with a retention bandage

Select a **non adhesive foam** from the formulary

Select a **silicone foam** from the formulary

This tool was created by Victoria Peach, Nurse Consultant Tissue Viability<sup>3</sup>

# Dressing change guide: optimising treatment

- Observe the dressing frequently
- As the dressing absorbs, exudate will wick to the top of the dressing and discolouration may be noticeable
- When the exudate spreads to the edges of the dressing or the dressing begins to leak, a dressing change is indicated
- Dressing change frequency will depend on the type of wound, volume of exudate and clinical situation
- Change at least every 7 days or as indicated by local protocol



**OK**



**Observe**



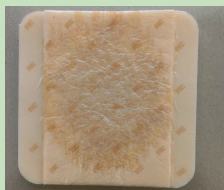
**Change**



**OK**



**Observe**



**Change**

# Using mini sizes

The unique mini sizes are designed to fit small wounds, saving wastage and nursing time and providing a cost-effective option



## The mini wrap:

- Custom fitted dressing for easy application on fingers and toes
- Can be used anywhere on the body and have proved useful for dressing genitalia, ear pressure ulcers, as well as fingers and toes

## The mini oval:

- A miniature version of the Tegaderm foam dressing
- Oval shape reduces the possibility of early dressing failure
- Multitude of uses: skin tags, mole removal, minor operations, bone assisted hearing aid wounds, pressure ulcers on ears and chin, maxillofacial surgery, malleoli, toe surgery, rhinoplasty

