Suprasorb® Liquacel Ag

Wound Dressing with Antimicrobial Silver
and Strengthening Cellulose Fibre

en Instructions for Use

Product Description
Suprasorb® Liquacel Ag Antimicrobial Wound Dressing is a soft, conformable non-woven fabric made from sodium carboxymethyl cellulose and strengthening cellulose fibre(s) with antimicrobial silver. The silver in the wound dressing has an antimicrobial effect upon many of the various wound bacteria held within the dressing. Through the gel formation, debris and any bacteria found in the wound exudate can be retained inside the fibre dressing and removed when the dressing is changed. When dry, Suprasorb® Liquacel Ag can easily be cut to the size of the wound. Even when the dressing is moist, as a gelled fibre, its structure remains intact. The high vertical absorption of exudate into the dressing forms a gel which assists in maintaining a moist wound environment, supporting autolytic debridement, protects the wound edge and surrounding skin from maceration, thus supporting the healing process. The product can also be used under compression.

Intended use
Suprasorb® Liquacel Ag antimicrobial wound dressings can be used for the management of moderate to heavily exuding wounds.

Indications for use
Under the supervision of a healthcare professional, Suprasorb® Liquacel Ag antimicrobial wound dressings may be used for the management of:
- Partial thickness burns
- Leg ulcers, pressure ulcers and diabetic ulcers
- Surgical wounds (e.g. post-operative, wounds left to heal by secondary intent and donor/graft sites)
- Traumatic wounds (e.g. abrasions and lacerations)
- Wounds that are prone to bleeding, such as wounds that have been mechanically or surgically debrided and donor sites, provided they are:


moderately to heavily exuding and


superficial or


deep:

If required, the dressings can be used in conjunction with a suitable moisturereta ining secondary dressing to keep the product in place and/or under compression.

Contraindications
The product should not be used on people who are sensitive or allergic to the dressing and its components.

Application
Preparing the Wound
Clean the wound carefully in accordance with current clinical standards. The skin surrounding the wound should be clean and dry.

Applying the Wound Dressing
• The size of the dressing should match the wound area. Keep the product away from the wound while cutting it to size.
• Place the dressing on the moist wound, overlapping the wound edges by approximate 1cm. If there is a low amount of exudate present, moisten the dressing the physiological saline solution (0.9%).
• For deep wounds, use the rope format. Pack wounds lightly and leave approximate 2,5cm overlapping the wound edges.
• Apply a suitable moisture-retaining secondary dressing to keep the product in place.

Changing the Dressing
The dressing should be changed when medically indicated (e.g. when the dressing has reached its absorbent capacity or when good wound care practicem dictates a change is needed). The interval between changes should be no more than 7 days. The product can be removed using e.g. sterile forceps.
Should the dressing adhere to wounds with lower exudate levels, moisten it with physiological saline solution (0.9%) before changing the dressing so that the healing process is not disturbed. Any gel residue on the wound should be removed when cleansing the wound. Wound cavities in particular should be well irrigated. The device use should be discontinued after 30 days. Dispose in accordance with local guidance.

Cautions
• If signs of infection are detected clinically the healthcare professional responsible for the treatment must decide on the next course of action.
• If signs of an allergic reaction are detected, discontinue the use of the product and seek advice from a healthcare professional on the next course of action.
• Product is sterilized by irradiation and must not be re-sterilized.
• Product remains sterile unless the package is opened or damaged.
• Suprasorb® Liquacel Ag is not intended to be used on wounds with severe bleeding, inside internal body cavities or closed wounds.
• The dressing is MRI Unsafe.

In general, the use of a suitable primary or secondary dressing is at the discretion of the treating physician and depends on the patient’s general situation. In the case of infected wounds, the treating physician will decide on the basis of the patient’s general condition whether an occlusive secondary dressing can be applied.

Do not freeze or refrigerate

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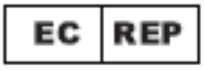

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