TODAY’S WOUND CARE TREATMENTS

SilvaSorb • Opticell Ag⁺ • TheraHoney • Optifoam Gentle • Marathon • Skintegrity

Exuderm Satin • Suresite • Stratasorb • Qwick • Maxorb Extra

Arglaes • Skintegrity Wound Cleanser • ThreeFlex • Sureprep No-Sting • Medigrip

Medfix • Bordered Gauze • TenderWet Active • Optifoam Ag⁺ • Hyalomatrix

FourFlex • Revitalon • Puracol Plus Ag⁺ • Versatel • Derma-Gel • OptiLock • Gentac
TODAY’S WOUND CARE TREATMENTS

Wound care professionals face many challenges. That’s why Medline offers a wide variety of products and programs that comprise a complete and cost-effective solution.

Throughout this catalog, you’ll find evidence-based products, information and resources, all organized around the DIMES® system of wound bed preparation and treatment. This organization method is intended to help the user match the right product with the situation.

Wound Bed Preparation (WBP) Paradigm

©Sibbald, Woo and Ayello

DIMES – FOR SUCCESSFUL CHRONIC WOUND CARE

DIMES is part of a wound bed preparation (WBP) paradigm for optimizing local wound care. After addressing patient-centered concerns and the cause of the wound, DIMES helps you implement effective treatments and make the best use of valuable resources.

Evidence Based References
### Table of Contents

<table>
<thead>
<tr>
<th>DEBRIDEMENT (Autolytic)</th>
<th>PRODUCTS</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>The removal of nonviable tissue by creating an optimal moist wound environment.</td>
<td>TenderWet® Active</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>TheraHoney®</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Arglaes®</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Maxorb® ES Ag+</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Maxorb® Extra Ag+</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Opticell® Ag+</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Ag+</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Ag+ Post-Op Strip</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Gentle Ag+</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>SilvaSorb®</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Derma-Gel®</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>Exuderm® LP</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Exuderm OdorShield®</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Exuderm® RCD</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Exuderm® Satin</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Maxorb® II</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Maxorb® ES</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Maxorb® Extra</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>Opticell®</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Optifoam®</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Gentle</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Heel</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>OptiLock®</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Qwicky™</td>
<td>44</td>
</tr>
<tr>
<td></td>
<td>Skintegrity® Hydrogel</td>
<td>46</td>
</tr>
<tr>
<td></td>
<td>SureSite®</td>
<td>48</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INFECTION / INFLAMMATION</th>
<th>PRODUCTS</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addressing bioburden and inflammation in the wound.</td>
<td>Arglaes®</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Maxorb® ES Ag+</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Maxorb® Extra Ag+</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Opticell® Ag+</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Ag+</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Ag+ Post-Op Strip</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Gentle Ag+</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>SilvaSorb®</td>
<td>22</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MOISTURE BALANCE</th>
<th>PRODUCTS</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieving and maintaining moisture balance in and around the wound.</td>
<td>Derma-Gel®</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>Exuderm® LP</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Exuderm OdorShield®</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Exuderm® RCD</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Exuderm® Satin</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Maxorb® II</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Maxorb® ES</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Maxorb® Extra</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>Opticell®</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Optifoam®</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Gentle</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Optifoam® Heel</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>OptiLock®</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Qwicky™</td>
<td>44</td>
</tr>
<tr>
<td></td>
<td>Skintegrity® Hydrogel</td>
<td>46</td>
</tr>
<tr>
<td></td>
<td>SureSite®</td>
<td>48</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EDGE / ENVIRONMENT</th>
<th>PRODUCTS</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treating stalled wounds where epithelium fails to migrate.</td>
<td>Hyalomatrix®</td>
<td>52</td>
</tr>
<tr>
<td></td>
<td>Puracol® Plus</td>
<td>54</td>
</tr>
<tr>
<td></td>
<td>Puracol® Plus Ag+</td>
<td>54</td>
</tr>
<tr>
<td></td>
<td>Revitalon®</td>
<td>56</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUPPORTIVE PRODUCTS, SERVICES AND EDUCATION</th>
<th>PRODUCTS</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Products that complement DIMES but do not fit into one of the above categories. Appropriate support promotes optimal outcomes.</td>
<td>Bordered Gauze</td>
<td>58</td>
</tr>
<tr>
<td></td>
<td>Stratasorb®</td>
<td>58</td>
</tr>
<tr>
<td></td>
<td>CoFlex® TLC</td>
<td>60</td>
</tr>
<tr>
<td></td>
<td>FourFlex® and ThreeFlex®</td>
<td>62</td>
</tr>
<tr>
<td></td>
<td>Gentac®</td>
<td>64</td>
</tr>
<tr>
<td></td>
<td>Marathon®</td>
<td>65</td>
</tr>
<tr>
<td></td>
<td>Medfix™</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>Medigrip™</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td>NE1® Wound Assessment Tool</td>
<td>70</td>
</tr>
<tr>
<td></td>
<td>Pinc™</td>
<td>72</td>
</tr>
<tr>
<td></td>
<td>Skintegrity® Wound Cleanser</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>Sureprep® and Sureprep® No-Sting</td>
<td>74</td>
</tr>
<tr>
<td></td>
<td>Unna-Z™</td>
<td>76</td>
</tr>
<tr>
<td></td>
<td>Versatel®</td>
<td>78</td>
</tr>
<tr>
<td></td>
<td>Therapeutic Support Surfaces</td>
<td>80</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SERVICES AND EDUCATION</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classification of Tissue Destruction</td>
<td>82</td>
</tr>
<tr>
<td>Educare® Hotline and Seminars</td>
<td>84</td>
</tr>
<tr>
<td>Educational Packaging</td>
<td>85</td>
</tr>
<tr>
<td>Medline University®</td>
<td>86</td>
</tr>
<tr>
<td>WoundRounds</td>
<td>87</td>
</tr>
</tbody>
</table>
ABOUT TENDERWET ACTIVE

- Solution is released as exudate is absorbed, providing an autolytic debriding process
- Absorbs and retains microorganisms
- Uses physiologically-compatible Ringer’s solution
- More effective than wet gauze therapy
- Will not stick to wound bed, which helps ease the pain of dressing changes
- Cost-effective
- Helps create an ideal moist healing environment
- High fluid retention
- Easy application and removal

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Diabetic ulcers
- Surgical wounds
- Lacerations and abrasions
- Skin tears
- First- and second-degree burns

CONTRAINDICATIONS
- Do not apply topical medication or disinfectant during treatment of TenderWet Active

CHANGE FREQUENCY
- TenderWet may be left in place for up to 24 hours
- Dressing change frequency will depend on the amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Bordered Gauze
- Stratasorb® Composite

Recommended Wound Conditions

| Shallow | No/minimal drainage | Primary dressing |
| Deep   | Moderate/heavy drainage | Secondary dressing |

TENDERWET® ACTIVE
Polymer Gel Pad
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.

<table>
<thead>
<tr>
<th>TENDERWET ACTIVE</th>
<th>Ideal for shallow wounds with necrotic tissue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Number</td>
<td>Description</td>
</tr>
<tr>
<td>MSC8301</td>
<td>1.6” (4.1 cm) Round</td>
</tr>
<tr>
<td>MSC8302</td>
<td>2.2” (5.6 cm) Round</td>
</tr>
<tr>
<td>MSC8303</td>
<td>3” x 3” (7.6 cm x 7.6 cm) Square</td>
</tr>
<tr>
<td>MSC8305</td>
<td>4” x 5” (10.2 cm x 12.7 cm) Rectangle</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TENDERWET ACTIVE CAVITY</th>
<th>Ideal for all wounds with necrotic tissue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Number</td>
<td>Description</td>
</tr>
<tr>
<td>MSC8401</td>
<td>1.6” (4.1 cm) Round</td>
</tr>
<tr>
<td>MSC8402</td>
<td>2.2” (5.6 cm) Round</td>
</tr>
<tr>
<td>MSC8403</td>
<td>3” x 3” (7.6 cm x 7.6 cm) Square</td>
</tr>
<tr>
<td>MSC8405</td>
<td>4” x 5” (10.2 cm x 12.7 cm) Rectangle</td>
</tr>
<tr>
<td>MSC8438</td>
<td>3” x 8” (7.6 cm x 20.3 cm) Rectangle</td>
</tr>
</tbody>
</table>

TenderWet provides a moist wound environment to help promote autolytic debridement of necrotic tissue.

References
**THERAHONEY®**

Medical Grade Honey

---

**Recommended Wound Conditions**

- Shallow
- No/minimal drainage
- Deep
- Moderate/heavy drainage
- Primary dressing
- Secondary dressing

---

**ABOUT THERAHONEY**

- Made of 100% medical grade honey (*Leptospermum scoparium*)
- Promotes autolytic debridement via high sugar levels (87%)²,³,⁴
- Helps rapidly reduce odor²,⁴
- Creates a moist wound healing environment⁴
- Should be paired with an occlusive, absorbent dressing⁵
- Compatible with silver dressings and wound cleanser surfactants⁶

---

**INDICATIONS**

- Partial or full-thickness wounds
- Wounds with no-to-minimal drainage
- Leg ulcers
- Pressure ulcers
- First- and second-degree burns
- Diabetic foot ulcers
- Surgical and trauma wounds
- Minor abrasions, lacerations, and cuts
- Minor scalds and burns

---

**CONTRAINDICATIONS**

- Third-degree burns
- Individuals with a known sensitivity to honey or bee venom

---

**CHANGE FREQUENCY**

- TheraHoney may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

---

**RECOMMENDED SECONDARY DRESSINGS**

- Optifoam® Gentle
- Stratasorb® Composite
- Optifoam® Adhesive
- OptiLock®

---

**DID YOU KNOW?**

TheraHoney draws fluid from the wound bed encouraging autolytic debridement. Use OptiLock in conjunction with TheraHoney for optimal absorbency. For more information on OptiLock, see pg. 42.
ORDERING INFORMATION

To order by the dressing, add “H” to the end of the item number.

**THERAHONEY GEL**  *Ideal for partial and full-thickness wounds at all drainage levels*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MNK0005</td>
<td>0.5 oz Tube (14.2 g)</td>
<td>A9270</td>
<td>10/bx</td>
</tr>
<tr>
<td>MNK0015</td>
<td>1.5 oz Tube (42.5 g)</td>
<td>A9270</td>
<td>12/cs</td>
</tr>
</tbody>
</table>

**THERAHONEY SHEET**  *Ideal for easy handling and application*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MNK0077</td>
<td>4&quot; x 5&quot; Sheet (10.2 cm x 12.7 cm)</td>
<td>A9270</td>
<td>10/bx</td>
</tr>
</tbody>
</table>

**THERAHONEY HD**  *200 percent more honey compared to TheraHoney Sheet*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MNK0082</td>
<td>2&quot; x 2&quot; Sheet (5.1 cm x 5.1 cm)</td>
<td>A9270</td>
<td>10/bx</td>
</tr>
<tr>
<td>MNK0087</td>
<td>4&quot; x 5&quot; Sheet (10.2 cm x 12.7 cm)</td>
<td>A9270</td>
<td>10/bx</td>
</tr>
<tr>
<td>MNK0089</td>
<td>1&quot; x 12&quot; Ribbon (2.5 cm x 30.5 cm)</td>
<td>A9270</td>
<td>10/bx</td>
</tr>
</tbody>
</table>

**THERAHONEY FOAM**  *Impregnated foam dressing ideal for absorption*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MNK1244</td>
<td>4&quot; x 4&quot; Pad (10.2 cm x 10.2 cm)</td>
<td>A9270</td>
<td>10/bx</td>
</tr>
</tbody>
</table>

The graph shown to the left represents how the osmotic action of Manuka honey draws exudate from subcutaneous tissue to the wound surface, removing debris, slough and necrotic tissue.

**References**
6. Schultz, G; Gibson, D. "The Impact of Silver Impregnated Dressings and Wound Cleansers on the Osmotic Strength of 100% Manuka Honey Gel Dressing". Department of Obstetrics and Gynecology; Institute of Wound Research; University of Florida; Gainesville, FL. 2013.
ARGLAES®
Antimicrobial Silver Powder

Recommended Wound Conditions
- Shallow
- Deep
- Primary dressing
- Secondary dressing
- No/minimal drainage
- Minimal/moderate drainage
- Moderate/heavy drainage

ABOUT ARGLAES
- Manages bacterial burden\(^1\)
- Continuous antimicrobial protection\(^1\)
- Extended wear time\(^1\)
- Non-staining
- Can convert other dressings to aid in an antimicrobial reduction

INDICATIONS
- Pressure ulcers
- Diabetic foot ulcers\(^2\)
- Partial and full-thickness wounds
- Leg ulcers
- Negative pressure wound therapy
- Grafted wounds
- Donor sites
- Lacerations and abrasions
- First- and second-degree burns

CONTRAINDICATIONS
- Third-degree burns
- Patients with a known sensitivity to silver
- As a surgical implant
- Do not use topical antibiotics in conjunction with Arglaes

CHANGE FREQUENCY
- Arglaes Powder may be left in place for up to 5 days
- Dressing change frequency will depend upon the amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Optifoam® Gentle
- Stratasorb® Composite
- Bordered Gauze
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the bottle, add “H” to the end of the item number.

ARGLAES POWDER  Ideal for difficult to dress wounds

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9202</td>
<td>2 g Bottle</td>
<td>A6262</td>
<td>5/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC9205</td>
<td>5 g Bottle</td>
<td>A6262</td>
<td>5/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC9210</td>
<td>10 g Bottle</td>
<td>A6262</td>
<td>5/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

Sustained-Release³

![Graph showing bacterial reduction](image)

**Staphylococcus aureus**
Greater than 90% reduction in viable bacterial numbers after 48 hours.

**Escherichia coli**
Greater than 90% reduction in viable bacterial numbers after 48 hours.

**Fecal streptococcus**
Greater than 90% reduction in viable bacterial numbers after 48 hours.

Powerful antimicrobial activity-up to a 6 log reduction (in vitro studies)

References
1. Internal report on file.
MAXORB® ES Ag⁺
Antimicrobial Silver CMC/Alginate Reinforced Ribbon

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT MAXORB ES Ag⁺
- Helps manage bacterial burden¹,²
- Reinforced silver CMC/alginate ribbon
- Controlled-release ionic silver
- Ribbon is ideal for tunneling or undermining wounds
- Highly absorbent⁵
- Reduces odor⁶
- Fluid will not wick laterally
- Up to 21-day antimicrobial protection¹,³

INDICATIONS
- Pressure ulcers⁶,⁷
- Leg ulcers
- First- and second-degree burns⁸
- Moderate to heavily draining partial and full-thickness wounds
- Diabetic foot ulcers
- Surgical wounds
- Graft and donor sites
- Trauma wounds

CONTRAINDICATIONS
- Third-degree burns
- Dry or lightly draining wounds
- Patients with a known sensitivity to alginate or silver
- To control heavy bleeding
- As a surgical implant

CHANGE FREQUENCY
- Maxorb ES Ag⁺ may be left in place for up to 21 days⁹
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Optifoam® Gentle
- Stratasorb® Composite
- Bordered Gauze
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

### MAXORB ES Ag+ RIBBON
For moderate to heavily draining wounds

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1918EP</td>
<td>.75&quot; x 18&quot; (1.9 cm x 45.7 cm)</td>
<td>A6199</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

### Maximum Wear Time

![Graph showing maximum wear time for Maxorb ES Ag+ compared to Aquacel Ag and Acticoat Absorbent](image)

**References**

MAXORB® EXTRA Ag+
Antimicrobial Silver CMC/Alginate

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep*
- Moderate/heavy drainage
- Secondary dressing

*Maxorb Extra Ag+ Rope is designed for deep wounds

ABOUT MAXORB EXTRA Ag+
- Helps manage bacterial burden\(^1,2\)
- Controlled-release ionic silver
- Cost-effective\(^4\)
- Easy dressing changes
- Highly absorbent\(^5\)
- Reduces odor\(^6\)
- Fluid will not wick laterally
- Up to 21-day antimicrobial protection\(^1,3\)

INDICATIONS
- Pressure ulcers\(^6,7\)
- Leg ulcers
- First- and second-degree burns\(^\ast\)
- Moderate to heavily draining partial and full-thickness wounds
- Diabetic foot ulcers
- Surgical wounds
- Graft and donor sites
- Trauma wounds

CONTRAINDICATIONS
- Third-degree burns
- Dry or lightly draining wounds
- Patients with a known sensitivity to alginate or silver
- To control heavy bleeding
- As a surgical implant

CHANGE FREQUENCY
- Maxorb Extra Ag\(^+\) may be left in place for up to 21 days\(^9\)
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Optifoam\(^\circledR\) Gentle
- Stratasorb\(^\circledR\) Composite
- Bordered Gauze

Asepsis index is a measure of 10 wound healing parameters. A lower score is preferable.

Modified Asepsis Index\(^9\)

Days

0 5 10 15 20 25

Maxorb Extra Ag\(^+\) Aquacel\(^\circledR\) Ag Acticoat\(^\circledR\) Absorbent

Acticoat™ Absorbent Aquacel® Ag Maxorb Extra Ag+
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

MAXORB EXTRA Ag+ For moderate to heavily draining wounds

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9422EP</td>
<td>2” x 2” (5.1 cm x 5.1 cm)</td>
<td>A6196</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC9445EP</td>
<td>4” x 4.75” (10.2 cm x 12.1 cm)</td>
<td>A6197</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC9448EP</td>
<td>4” x 8” (10.2 cm x 20.3 cm)</td>
<td>A6197</td>
<td>5/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC9466EP</td>
<td>6” x 6” (15.2 cm x 15.2 cm)</td>
<td>A6197</td>
<td>5/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC94812EP</td>
<td>8” x 12” (20.3 cm x 30.5 cm)</td>
<td>A6198</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

MAXORB EXTRA Ag+ RIBBON For moderate to heavily draining wounds

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9412EP</td>
<td>1” x 12” (2.5 cm x 30.5 cm)</td>
<td>A6199</td>
<td>5/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

Maximum Wear Time³

Absorbency Comparisons⁶,⁷

References
Opticell Ag+ has been shown to kill effectively microorganisms for up to a 7 days, including:

- Methicillin-resistant Staphylococcus aureus (MRSA) ATCC 33591—gram positive bacteria
- Escherichia coli ATCC 8739—gram negative bacteria
- Pseudomonas aeruginosa ATCC 9027—gram negative bacteria
- Candida albicans ATCC 10231—yeast
- Vancomycin-resistant Enterococcus faecium (VRE) ATCC 51575—gram positive bacteria
- Staphylococcus aureus ATCC 6538—gram positive bacteria

Recommended Wound Conditions

- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

**INDICATIONS**

- Partial and full-thickness wounds
- Venous stasis ulcers
- Pressure ulcers
- First- and second-degree burns
- Diabetic foot ulcers
- Surgical and trauma wounds
- Donor sites
- Arterial ulcers and leg ulcers of mixed etiology

**CONTRAINDICATIONS**

- Individuals with a sensitivity to silver or chitosan, which is derived from shellfish
- Third-degree burns

**CHANGE FREQUENCY**

- May be left in place for up to 7 days
- Dressing change frequency will depend on the amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**

- Optifoam® Gentle
- Bordered Gauze
- Stratasorb® Composite

References

### ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

#### OPTICELL Ag+ GELLING FIBER SHEETS  *Ideal for partial and full-thickness wounds of all drainage levels*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9822EP</td>
<td>Opticell Ag+, 2” x 2” (5.1 cm x 5.1 cm)</td>
<td>A6196</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC9845EP</td>
<td>Opticell Ag+, 4” x 5” (10.2 cm x 12.7 cm)</td>
<td>A6197</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC9866EP</td>
<td>Opticell Ag+, 6” x 6” (15.2 cm x 15.2 cm)</td>
<td>A6197</td>
<td>5/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC98812EP</td>
<td>Opticell Ag+, 8”x12” (20.32 cm x 15.2 cm)</td>
<td>A6198</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

#### OPTICELL Ag+ GELLING FIBER RIBBON  *For moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9818EP</td>
<td>Opticell Ag+, 0.75” x 18” (1.9 cm x 45.7cm)</td>
<td>A6199</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>
OPTIFOAM® Ag+
Antimicrobial Silver Foam

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT OPTIFOAM Ag+
- Ionic silver provides an antimicrobial barrier
- Continuous antimicrobial protection
- Highly absorbent
- Conformable
- Can manage repeated bacteria introduction
- Non-staining
- Moisture vapor transmission rate (MVTR) adjusts to fluid level
- Helps create an ideal healing environment
- Waterproof outer layer
- Low friction and shear outer layer

Fluid Handling Comparative Study

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Surgical wounds
- Wounds with colonization
- Leg ulcers
- Diabetic foot ulcers
- Donor sites
- Lacerations and abrasions
- Skin tears
- First- and second-degree burns
- Under compression bandages

CONTRAINDICATIONS
- Third-degree burns
- Lesions with active vasculitis
- Individuals with a known sensitivity to silver

CHANGE FREQUENCY
- Optifoam Ag+ may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Medfix™ Tape
- Gentac® Tape
- Elastic Net
- Medigrip™ Tubular Bandage

References
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

**OPTIFOAM Ag⁺ ADHESIVE**  *For wounds with intact periwound skin*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9604EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm), 2.5&quot; x 2.5&quot; (6.4 cm x 6.4 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

**OPTIFOAM Ag⁺ SACRAL**  *Ideal for sacral wounds needing an antimicrobial barrier*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9606EP</td>
<td>6&quot; x 5.5&quot; (15.2 cm x 14.2 cm)</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

**OPTIFOAM Ag⁺ NON-ADHESIVE**  *For wounds with fragile periwound skin*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9614EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6209</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

**Comparative Antimicrobial Effect Study**

4 hrs. at 37°C exposure to 4 sq cm of each dressing

<table>
<thead>
<tr>
<th>Colony Forming Units (CFUs) initial population</th>
</tr>
</thead>
<tbody>
<tr>
<td>10⁶ - 10⁷</td>
</tr>
</tbody>
</table>

- **Optifoam Ag⁺** has the least number of surviving colony forming units at 4 hours.
- **MRSA**
- **P. aeruginosa**
OPTIFOAM® Ag+ POST-OP STRIP
Antimicrobial Silver Post-Op Foam

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT OPTIFOAM Ag+ POST-OP STRIPS
• Ionic silver provides antimicrobial barrier\(^1\) over incision sites
• Continuous antimicrobial protection\(^1\)
• Thin, conformable adhesive border
• Can manage repeated bacteria introduction
• Non-staining
• Silicone adhesive border (only for Optifoam Gentle Ag+ Post-Op)

INDICATIONS
• Incision sites

CONTRAINDICATIONS
• Third-degree burns
• Lesions with active vasculitis
• Individuals with a known sensitivity to silver

CHANGE FREQUENCY
• Optifoam Ag+ Post-Op Strip may be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
• N/A

DID YOU KNOW?
Sureprep® No-Sting skin protectant ensures proper adhesion and removal of Optifoam Ag+ Post-Op Strip. For more information about Sureprep No-Sting, see pg. 74.

References
## ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

### OPTIFOAM Ag⁺ POST-OP

*An all-in-one dressing for post-operative wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9636</td>
<td>3.5&quot; x 6&quot; (8.9 cm x 15.2 cm), 1.5&quot; x 4&quot; (3.8 cm x 10.2 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC96310</td>
<td>3.5&quot; x 10&quot; (8.9 cm x 25.4 cm), 1.5&quot; x 8&quot; (3.8 cm x 20.3 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC96314</td>
<td>3.5&quot; x 14&quot; (8.9 cm x 35.6 cm), 1.5&quot; x 12&quot; (3.8 cm x 30.5 cm) Pad</td>
<td>A6213</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

### OPTIFOAM GENTLE Ag⁺ POST-OP

*An all-in-one dressing with a silicone adhesive border for post-operative wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9736</td>
<td>3.5&quot; x 6&quot; (8.9 cm x 15.2 cm), 1.5&quot; x 4&quot; (3.8 cm x 10.2 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC97310</td>
<td>3.5&quot; x 10&quot; (8.9 cm x 25.4 cm), 1.5&quot; x 8&quot; (3.8 cm x 20.3 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC97314</td>
<td>3.5&quot; x 14&quot; (8.9 cm x 35.6 cm), 1.5&quot; x 12&quot; (3.8 cm x 30.5 cm) Pad</td>
<td>A6213</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

### Comparative Antimicrobial Effect Study

4 hrs. at 37°C exposure to 4 sq cm of each dressing

$10^6 - 10^7$ Colony Forming Units (CFUs) initial population

*Optifoam Ag⁺ has the least number of surviving colony forming units at 4 hours.*
OPTIFOAM® GENTLE Ag+
Antimicrobial Silver Foam with Silicone Adhesive Dressing

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT OPTIFOAM GENTLE Ag+
- Silicone dressing provides gentle adhesion
- Highly conformable dressing can be lifted and reapplied
- Moisture vapor transmission rate (MVTR) adjusts to fluid level
- Ionic silver provides an antimicrobial barrier
- Continuous antimicrobial barrier protection
- Helps maintain a moist wound healing environment
- Waterproof outer layer
- Highly absorbent
- Non-staining
- Low friction and shear outer layer

INDICATIONS
- Pressure ulcers
- Partial and shallow full-thickness wounds
- Surgical wounds
- Wounds with colonization
- Leg ulcers
- Diabetic foot ulcers
- Donor sites
- Lacerations and abrasions
- Skin tears
- First- and second-degree burns

CONTRAINDICATIONS
- Third-degree burns
- Lesions with active vasculitis
- Individuals with a known sensitivity to silver

CHANGE FREQUENCY
- Optifoam Gentle Ag+ may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS FOR OPTIFOAM GENTLE Ag
SILICONE FACED FOAM
- Gentac tape
- Elastic net
- Medigrip tubular bandage

References
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

### OPTIFOAM GENTLE Ag+ SILICONE FACED FOAM AND BORDER WITH ANTIMICROBIAL SILVER

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9644EP</td>
<td>4” x 4” (10.2 cm x 10.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>2.5” x 2.5” (6.4 cm x 6.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSC9666EP</td>
<td>6” x 6” (15.2 cm x 15.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>4.5” x 4.5” (11.4 cm x 11.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### OPTIFOAM GENTLE Ag+ SILICONE FACED FOAM WITH ANTIMICROBIAL SILVER

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9544EP</td>
<td>4” x 4” (10.2 cm x 10.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC9566EP</td>
<td>6” x 6” (15.2 cm x 15.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

### OPTIFOAM GENTLE Ag+ SILICONE BORDERED FOAM WITH ANTIMICROBIAL SILVER

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9744EP</td>
<td>4” x 4” (10.2 cm x 10.2 cm), 2.5” x 2.5” (6.4 cm x 6.4 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC9766EP</td>
<td>6” x 6” (15.2 cm x 15.2 cm), 4.5” x 4.5” (11.4 cm x 11.4 cm) Pad</td>
<td>A6213</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>
SILVASORB®
Antimicrobial Silver Hydrogel and Hydrogel Sheet

ABOUT SILVASORB
- Helps manage bacterial burden\(^1,2\)
- Continuous antimicrobial protection\(^1,3\)
- Non-staining\(^1\)
- Gentle for the patient\(^4,5\)
- Advanced fluid management\(^1\)
- Extended wear time\(^3,6,7\)

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Diabetic foot ulcers
- Graft wounds and donor sites
- Skin tears
- Surgical wounds
- Lacerations and abrasions
- First- and second-degree burns

CONTRAINDICATIONS
- Individuals with a known sensitivity to silver

CHANGE FREQUENCY
- Sheets may be left in place for up to 7 days
- Amorphous gel may be left in place for up to 3 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Optifoam® Gentle
- Stratasorb® Composite
- Bordered Gauze

Survival Curve with SilvaSorb\(^1\)

SilvaSorb has powerful antimicrobial activity (in vitro), 6-8 log reduction within four hours.

References
ORDERING INFORMATION

To order by the tube or jar, add “H” to the end of the item number.

**SILVASORB GEL**  *For lightly draining wounds in need of an antimicrobial barrier*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC93025EP</td>
<td>0.25 oz Tube</td>
<td>A6248</td>
<td>25/bx</td>
</tr>
<tr>
<td>MSC9301EP</td>
<td>1.5 oz Tube</td>
<td>A6248</td>
<td>12/cs</td>
</tr>
<tr>
<td>MSC9303EP</td>
<td>3 oz Tube</td>
<td></td>
<td>12/cs</td>
</tr>
<tr>
<td>MSC9308EP</td>
<td>8 oz Tube</td>
<td>A6248</td>
<td>6/cs</td>
</tr>
<tr>
<td>MSC9316EP</td>
<td>16 oz Net Weight Jar</td>
<td>A6248</td>
<td>8/cs</td>
</tr>
</tbody>
</table>

To order by the dressing, add “H” to the end of the item number.

**SILVASORB SITE**  *For IV catheters, central venous and arterial lines, dialysis catheters and orthopedic pin sites*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9310EP</td>
<td>1” (2.5 cm) Circular with Slit</td>
<td>A6242</td>
<td>30/cs</td>
</tr>
<tr>
<td>MSC9320EP</td>
<td>1.75” (4.5 cm) Circular with Slit</td>
<td>A6242</td>
<td>30/cs</td>
</tr>
</tbody>
</table>

To order by the box, add “Z” to the end of the item number.

**SILVASORB SHEETS**  *For flat wounds with no to moderate drainage*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9322EP</td>
<td>2” x 2” (5.1 cm x 5.1 cm)</td>
<td>A6242</td>
<td>5/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC9344EP</td>
<td>4.25” x 4.25” (10.8 cm x 10.8 cm)</td>
<td>A6243</td>
<td>5/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC9348EP</td>
<td>4” x 8” (10.2 cm x 20.3 cm)</td>
<td>A6243</td>
<td>5/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>

**SILVASORB PERFORATED SHEETS**  *For flat wounds with moderate to heavy drainage*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9340EP</td>
<td>4.25” x 4.25” (10.8 cm x 10.8 cm)</td>
<td>A6243</td>
<td>5/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC93410EP</td>
<td>4” x 10” (10.2 cm x 25.4 cm)</td>
<td>A6243</td>
<td>5/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>

**SILVASORB CAVITY**  *For cavity wounds with all drainage levels*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9360EP</td>
<td>6 g wound filler</td>
<td>A6262</td>
<td>5/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>
INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Surgical wounds
- Lacerations and abrasions
- First- and second-degree burns

CONTRAINDICATIONS
- Patients with known hypersensitivity to glycerine

CHANGE FREQUENCY
- Derma-Gel may be left in place for up to 5 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Medfix™ Tape
- Suresite® Film (for waterproofing)
- Elastic Net
- Medigrip™ Tubular Bandage

DID YOU KNOW?
Medigrip™ provides a gentle way to keep Derma-Gel in place. For more information on Medigrip, see pg. 68.

References
2. Independent study performed by NAMSA, Northwood, Ohio.
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

DERMA-GEL  Provides cooling and padding effect

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>NON8000</td>
<td>4” x 4” (10.2 cm x 10.2 cm)</td>
<td>A6242</td>
<td>25/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

Absorption Comparison

Derma-Gel has a very high absorption capacity.
EXUDERM®
Hydrocolloid Wound Dressings

INDICATIONS
• Pressure ulcers
• Partial and full-thickness wounds
• Leg ulcers
• Donor sites
• Wounds with light to moderate drainage
• Lacerations and abrasions
• First- and second-degree burns

CONTRAINDICATIONS
• Third-degree burns

CHANGE FREQUENCY
• Exuderm dressings can be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
• N/A

About Exuderm®
• Manages drainage¹
• Longer wear time
• Protective, occlusive barrier
• Satin finish backing

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

Water Absorption¹
% absorption at 24h

Exuderm Satin     DuoDERM Signal®

References
ORDERING INFORMATION

To order by the dressing, add “H” to the end of the item number.

### EXUDERM SATIN
*Hydrocolloid wound dressing with satin finish backing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC5422</td>
<td>2&quot; x 2&quot; (5.1 cm x 5.1 cm)</td>
<td>A6234</td>
<td>20/bx</td>
</tr>
<tr>
<td>MSC5444</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6234</td>
<td>10/bx</td>
</tr>
<tr>
<td>MSC5466</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6235</td>
<td>5/bx</td>
</tr>
<tr>
<td>MSC5488</td>
<td>8&quot; x 8&quot; (20.3 cm x 20.3 cm)</td>
<td>A6236</td>
<td>5/bx</td>
</tr>
<tr>
<td>MSC5470</td>
<td>Sacral 4&quot; x 3.6&quot; (10.2 cm x 9.1 cm)</td>
<td>Pending</td>
<td>10/bx</td>
</tr>
<tr>
<td>MSC5475</td>
<td>Sacral 6&quot; x 6.5&quot; (16.3 cm x 16.5 cm)</td>
<td>Pending</td>
<td>5/bx</td>
</tr>
</tbody>
</table>

### EXUDERM ODORSHIELD
*Hydrocolloid wound dressing with odor control*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC5522</td>
<td>2&quot; x 2&quot; (5.1 cm x 5.1 cm)</td>
<td>A6234</td>
<td>10/bx</td>
</tr>
<tr>
<td>MSC5544</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6234</td>
<td>10/bx</td>
</tr>
<tr>
<td>MSC5566</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6235</td>
<td>5/bx</td>
</tr>
<tr>
<td>MSC5588</td>
<td>8&quot; x 8&quot; (20.3 cm x 20.3 cm)</td>
<td>A6236</td>
<td>5/bx</td>
</tr>
<tr>
<td>MSC5570</td>
<td>Sacral 4&quot; x 3.6&quot; (10.2 cm x 9.1 cm)</td>
<td>A6234</td>
<td>10/bx</td>
</tr>
<tr>
<td>MSC5575</td>
<td>Sacral 6&quot; x 6.5&quot; (16.3 cm x 16.5 cm)</td>
<td>A6235</td>
<td>5/bx</td>
</tr>
</tbody>
</table>

### EXUDERM LP
*Thin hydrocolloid dressing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC5100</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6234</td>
<td>10/bx</td>
</tr>
<tr>
<td>MSC5125</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6235</td>
<td>5/bx</td>
</tr>
</tbody>
</table>

### EXUDERM RCD
*Hydrocolloid wound dressing with foam backing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC5200</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6234</td>
<td>5/bx</td>
</tr>
<tr>
<td>MSC5225</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6235</td>
<td>5/bx</td>
</tr>
<tr>
<td>MSC5250</td>
<td>8&quot; x 8&quot; (20.3 cm x 20.3 cm)</td>
<td>A6236</td>
<td>5/bx</td>
</tr>
</tbody>
</table>
MAXORB® II
100% Alginate

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT MAXORB II
- Superior fluid handling
- 100% alginate dressing
- High wet strength – removes in one piece
- Fluid does not wick laterally
- Improved gelling capability

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Diabetic ulcers
- Surgical wounds
- Donor sites
- Lacerations and abrasions
- First- and second-degree burns

CONTRAINDICATIONS
- Individuals with a known sensitivity to alginates
- Third-degree burns
- To control heavy bleeding
- As a surgical sponge
- Dry or lightly draining wounds

CHANGE FREQUENCY
- May be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Optifoam® Gentle
- Bordered Gauze
- Stratasorb® Composite

References
## ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.  
To order by the dressing, add “H” to the end of the item number.

### MAXORB II SHEETS  *Ideal for moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7322EP</td>
<td>2&quot; x 2&quot; (5 cm x 5 cm)</td>
<td>A6196</td>
<td>10 bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC7344EP</td>
<td>4&quot; x 4&quot; (10 cm x 10 cm)</td>
<td>A6196</td>
<td>10 bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC7366EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>Pending</td>
<td>5/bx, 10bx/cs</td>
</tr>
<tr>
<td>MSC7348EP</td>
<td>4&quot; x 8&quot; (10.2 cm x 20.3 cm)</td>
<td>Pending</td>
<td>5/bx, 10bx/cs</td>
</tr>
</tbody>
</table>

### MAXORB II ROPE  *Ideal for moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7312EP</td>
<td>1&quot; x 12&quot; (2.5 cm x 30.5 cm)</td>
<td>A6199</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC7318EP</td>
<td>1&quot; x 18&quot; (2.5 cm x 45.7 cm)</td>
<td>Pending</td>
<td>10/bx, 5bx/cs</td>
</tr>
</tbody>
</table>
MAXORB® ES
CMC/Alginate Reinforced Ribbon

ABOUT MAXORB ES
• Highly absorbent
• Reinforced CMC/alginate ribbon
• Fluid will not wick laterally
• Easy dressing changes
• Ribbon is ideal for tunneling or undermining wounds

INDICATIONS
• Pressure ulcers
• Partial and full-thickness wounds
• Leg ulcers
• Diabetic ulcers
• Surgical wounds
• Donor sites
• Lacerations and abrasions
• First- and second-degree burns

CONTRAINDICATIONS
• Third-degree burns
• For use as a surgical sponge
• Dry wounds
• Patients with a known sensitivity to alginates

CHANGE FREQUENCY
• Maxorb ES may be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
• Optifoam® Gentle
• Stratasorb® Composite
• Bordered Gauze

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Deep
- Moderate/Heavy drainage
- Primary dressing
- Secondary dressing

References
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

MAXORB ES RIBBON  *For moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7918EP</td>
<td>.75&quot; x 18&quot; (1.9 cm x 45.7)</td>
<td>A6199</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>
MAXORB® EXTRA
CMC/Alginate

ABOUT MAXORB EXTRA

• Highly absorbent
• Superior fluid handling
• Fluid will not wick laterally
• Easy dressing changes

INDICATIONS

• Pressure ulcers
• Partial and full-thickness wounds
• Leg ulcers
• Diabetic ulcers
• Surgical wounds
• Donor sites
• Lacerations and abrasions
• First- and second-degree burns

CONTRAINDICATIONS

• Third-degree burns
• For use as a surgical sponge
• Dry wounds
• Patients with a known sensitivity to alginates

CHANGE FREQUENCY

• Maxorb Extra may be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS

• Optifoam® Gentle
• Stratasorb® Composite
• Bordered Gauze

References

## MAXORB EXTRA  
*For moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7022EP</td>
<td>2&quot; x 2&quot; (5.1 cm x 5.1 cm)</td>
<td>A6196</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC7044EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6196</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC7048EP</td>
<td>4&quot; x 8&quot; (10.2 cm x 20.3 cm)</td>
<td>A6197</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

## MAXORB EXTRA ROPE  
*For moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7012EP</td>
<td>1&quot; x 12&quot; (2.5 cm x 30.5 cm) Rope</td>
<td>A6199</td>
<td>5/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

## MAXORB EXTRA FLAT ROPE  
*For moderate to heavily draining wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7112EP</td>
<td>1&quot; x 12&quot; (2.5 x 30.5)</td>
<td>A6199</td>
<td>5/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

To order by the box, add “Z” to the end of the item number.  
To order by the dressing, add “H” to the end of the item number.
INDICATIONS
- Partial and full-thickness wounds
- Venous stasis ulcers
- Pressure ulcers
- First- and second-degree burns
- Diabetic foot ulcers
- Surgical and trauma wounds
- Donor sites
- Arterial ulcers and leg ulcers of mixed etiology

CONTRAINDICATIONS
- Third-degree burns
- Individuals with a sensitivity to chitosan, which is derived from shellfish

CHANGE FREQUENCY
- Opticell® may be left in place for up to 7 days
- Dressing change frequency will depend on the amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Optifoam® Gentle
- Bordered Gauze
- Stratasorb® Composite

ABOUT OPTICELL
- Chytoform™ gelling fiber technology
- Highly conformable
- Versatile – can be used on all drainage levels
- Three times as strong as traditional Aquacel®
- No lateral wicking – limits maceration
- Highly absorbent
- Maintains a moist wound healing environment
- Surface area memory (SAM) – retains its size
- Gentle removal from the wound

Surface Area Memory (SAM) Results
Retains its shape and size to maintain complete wound coverage.
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

OPTICELL GELLING FIBER SHEETS  
*Ideal for partial and full-thickness wounds of all drainage levels*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7822EP</td>
<td>2&quot; x 2&quot; (5.1 cm x 5.1 cm)</td>
<td>A6196</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC7844EP</td>
<td>4.25&quot; x 4.25&quot; (10.8 cm x 10.8 cm)</td>
<td>A6197</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC7866EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6197</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

OPTICELL GELLING FIBER RIBBON  
*Ideal for filling wounds of all drainage levels*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC7818EP</td>
<td>0.75&quot; x 18&quot; (1.9 cm x 45.7 cm)</td>
<td>A6199</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

Absorption Study Results

<table>
<thead>
<tr>
<th>Material</th>
<th>Absorbency (g/100cm²)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opticell®</td>
<td>30</td>
</tr>
<tr>
<td>Aquacel® Extra®</td>
<td>25</td>
</tr>
<tr>
<td>Aquacel®</td>
<td>20</td>
</tr>
<tr>
<td>Durafiber®</td>
<td>15</td>
</tr>
</tbody>
</table>

Opticell delivers best in-class absorption capabilities.

References

1. Lab testing data on file.
**INDICATIONS**
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Donor sites
- Lacerations and abrasions
- Skin tears
- First- and second-degree burns

**CONTRAINDICATIONS**
- Third-degree burns
- Lesions with active vasculitis

**CHANGE FREQUENCY**
- Optifoam may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**
- Medfix™ Tape (for Optifoam Non-Adhesive)
- Elastic Net (for Optifoam Non-Adhesive)
## OPTIFOAM ADHESIVE
*An all-in-one dressing for fluid handling*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1044EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm), 2.5&quot; x 2.5&quot; (6.4 cm x 6.4 cm) Pad</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC1066EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm), 4.5&quot; x 4.5&quot; (11.4 cm x 11.4 cm) Pad</td>
<td>A6213</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

## OPTIFOAM SACRUM
*Ideal for sacral wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1065EP</td>
<td>6&quot; x 5.5&quot; (15.5 cm x 14.2 cm) Sacral</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

## OPTIFOAM NON-ADHESIVE
*Superb fluid handling with a variety of applications*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1244EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6209</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC1266EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6210</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

## OPTIFOAM BASIC
*For general wounds or tube site care, without waterproof backing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1133</td>
<td>3&quot; x 3&quot; (7.6 cm x 7.6 cm)</td>
<td>A6209</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC1133F</td>
<td>3&quot; x 3&quot; (7.6 cm x 7.6 cm) with Fenestration</td>
<td>A6209</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC1145</td>
<td>4&quot; x 5&quot; (10.2 cm x 12.7 cm)</td>
<td>A6210</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

## OPTIFOAM SITE
*Designed specifically for tube sites with radial slit and starburst opening*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1104</td>
<td>4&quot; (10.2 cm) Adhesive Dressing, 2&quot; Pad</td>
<td>A6212</td>
<td>30/bag, 4 bags/cs</td>
</tr>
<tr>
<td>MSC1102</td>
<td>2&quot; (5.1cm) Non-Adhesive Pad</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

## OPTIFOAM THIN
*Highly conformable for increased patient comfort*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1523EP</td>
<td>2&quot; x 3&quot; (5.1 cm x 7.6 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC1544EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

To order by the box, add “Z” to the end of the item number. To order by the dressing, add “H” to the end of the item number.
OPTIFOAM® GENTLE
Foam dressings with silicone adhesive

Recommended Wound Conditions
- Shallow
- Deep
- No/minimal drainage
- Moderate/heavy drainage
- Primary dressing
- Secondary dressing

ABOUT OPTIFOAM GENTLE
- Silicone adhesive provides gentle adhesion
- Highly conformable¹ dressing can be lifted and reapplied
- Moisture vapor transmission rate (MVTR) adjusts to fluid level
- Highly absorbent¹
- Helps create ideal healing environment
- Waterproof outer layer protects wound and keeps bacteria out
- Low friction and shear outer layer

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Donor sites
- Lacerations and abrasions
- Skin tears
- First- and second-degree burns

CONTRAINDICATIONS
- Third-degree burns

CHANGE FREQUENCY
- Optifoam Gentle may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS FOR OPTIFOAM GENTLE SILICONE FACED FOAM
- Gentac tape
- Elastic net
- Medigrip Tubular Bandage

References
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

### SILICONE-FACED FOAM AND BORDER DRESSING

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2133EP</td>
<td>3&quot; x 3&quot; (7.6 cm x 7.6 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>1.75&quot; x 1.75&quot; (4.4 cm x 4.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSC2144EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>2.5&quot; x 2.5&quot; (6.4 cm x 6.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSC2166EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>4.5&quot; x 4.5&quot; (11.4 cm x 11.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SILICONE BORDERED FOAM DRESSING

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC20162EP</td>
<td>1.6&quot; x 2&quot; (4.0 cm x 5.0 cm)</td>
<td>Pending</td>
<td>10/bx, 7 bx/cs</td>
</tr>
<tr>
<td></td>
<td>0.8&quot; x 1.2&quot; (2.0 cm x 3.0 cm) Pad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSC2033EP</td>
<td>3&quot; x 3&quot; (7.6 cm x 7.6 cm)</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>1.5&quot; x 1.5&quot; (3.8 cm x 3.8 cm) Pad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSC2044EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>A6212</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>2.5&quot; x 2.5&quot; (6.4 cm x 6.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSC2066EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>A6213</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td></td>
<td>4.5&quot; x 4.5&quot; (11.4 cm x 11.4 cm) Pad</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SILICONE-FACED FOAM DRESSING

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2244EP</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC2266EP</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm)</td>
<td>Pending</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC2288EP</td>
<td>8&quot; x 8&quot; (20.3 cm x 20.3 cm)</td>
<td>Pending</td>
<td>5/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>

### SILICONE BORDERED FOAM DRESSING

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2077EP</td>
<td>7&quot; x 7&quot; (17.8 cm x 17.8 cm)</td>
<td>A6213</td>
<td>5/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC20109EP</td>
<td>10&quot; x 9&quot; (25.4 cm x 22.9 cm)</td>
<td>A6213</td>
<td>5/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>
OPTIFOAM® HEEL
Non-adhesive Foam

INDICATIONS
• Pressure ulcers
• Partial and full-thickness wounds
• Diabetic foot ulcers

CONTRAINDICATIONS
• Third-degree burns
• Lesions with active vasculitis

CHANGE FREQUENCY
• Optifoam Heel may be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
• Medfix™ Tape
• Elastic Net
• Medigrip™ Tubular Bandage

DID YOU KNOW?
Medigrip provides a gentle way to keep Optifoam Heel in place. For more information on Medigrip, see pg. 68.
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

OPTIFOAM HEEL  Designed for heel wounds

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1200EP</td>
<td>Heel Shaped</td>
<td>A6210</td>
<td>5/bx, 8bx/cs</td>
</tr>
</tbody>
</table>

Coefficient of Friction of Film Backing

Optifoam® Heel has 50% less friction than the leading heel shaped dressing.

Absorption Capacity Under Compression

Optifoam Heel absorbs 44% more under compression than the leading heel shaped dressing.

References

OPTILOCK®
Super-Absorbent Polymer

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT OPTILOCK
- Super-absorbent polymer core
- Locks in drainage under compression
- Adjusts absorption to the amount of drainage
- Protects skin from maceration
- Non-adherent wound contact layer

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Lacerations and abrasions
- Wounds under compression

CONTRAINDICATIONS
- Third-degree burns
- Individuals with a known sensitivity to the product itself or its components

CHANGE FREQUENCY
- OptiLock may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Medfix™ Tape
- Elastic Net
- Gentac® Tape
- CoFlex® TLC compression systems

DID YOU KNOW?
OptiLock is ideal for highly draining venous leg ulcers because of its gentle contact layer and fluid locking feature. Even under high compression bandages, the fluid is retained in the dressing. Use OptiLock in conjunction with CoFlex® compression systems. To learn more, see pg. 60.
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

<table>
<thead>
<tr>
<th>OPTILOCK</th>
<th>Non-adherent and super absorbent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Number</td>
<td>Description</td>
</tr>
<tr>
<td>MSC6433EP</td>
<td>3” x 3” (7.5 cm x 7.5 cm)</td>
</tr>
<tr>
<td>MSC6444EP</td>
<td>4” x 4” (10.2 cm x 10.2 cm)</td>
</tr>
<tr>
<td>MSC6455EP</td>
<td>5” x 5.5” (12.7 cm x 14 cm)</td>
</tr>
<tr>
<td>MSC64610EP</td>
<td>6.5” x 10” (16.5 cm x 25.4 cm)</td>
</tr>
<tr>
<td>MSC64812EP</td>
<td>8” x 12” (20.3 cm x 30.5 cm)</td>
</tr>
</tbody>
</table>

OptiLock Absorbs And Retains More Fluid

In manufacturer’s laboratory testing, Medline’s OptiLock dressings outperformed a leading silicone-faced foam dressing. OptiLock’s remarkable absorption and fluid retention capabilities raise the bar for gentle wound care.

Absorption Capacity Under Compression

Fluid Loss Under Compression

OptiLock absorbs approximately three times more fluid than a leading silicone-faced foam dressing.

OptiLock dressings retain substantially more fluid under compression than a leading silicone-faced foam dressing.

References

QWICK™
Dressing with Aquaconductive™ Technology

**INDICATIONS**
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Lacerations and abrasions
- Wounds under compression

**CONTRAINDICATIONS**
- Third degree burns

**CHANGE FREQUENCY**
- Qwick may be left in place for up to 7 days
- Dressing change frequency will depend on the amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**
- Optifoam® Gentle
- Bordered Gauze
- Elastic Net

---

**ABOUT QWICK**

- Multi-layer construction wicks and retains fluid to help protect the skin from maceration
- Can be cut to size
- Flexible
- Super-absorbent
- Wicking

**Recommended Wound Conditions**

- **Shallow**
- **No/minimal drainage**
- **Deep**
- **Moderate/heavy drainage**

- **Primary dressing**
- **Secondary dressing**
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC5822</td>
<td>2&quot; x 2&quot; (5.1 cm x 5.1 cm)</td>
<td>A6196</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC5844</td>
<td>4.25&quot; x 4&quot; (10.8 cm x 10.2 cm)</td>
<td>A6197</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC5868</td>
<td>6.125&quot; x 8&quot; (15.56 cm x 20.321 cm)</td>
<td>A6198</td>
<td>10/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>
SKINTEGRITY®
Hydrogel and Hydrogel Impregnated Gauze

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT SKINTEGRITY
- Helps create a moist wound environment
- Balanced formulation
- Easy irrigation

Cytotoxicity Test For Skintegrity Hydrogel
Using Murine L929 Embryo Fibroblasts Agar Overlay Neutral Red Assay

<table>
<thead>
<tr>
<th>Test Material</th>
<th>IDRCC #278 (Wound Gel)</th>
<th>Negative Control</th>
<th>Positive Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concentration %</td>
<td>100% 21 Hours</td>
<td>N/A 21 Hours</td>
<td>100% 21 Hours</td>
</tr>
<tr>
<td>Zone of Inhibition (mm)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Comments/Observations (Grade and Reactivity)</td>
<td>0 / None</td>
<td>0 / None</td>
<td>Entire disk was clear/cells dead</td>
</tr>
</tbody>
</table>

Skintegrity Hydrogel is not harmful to tissue.

INDICATIONS
- Pressure ulcers
- Partial and full-thickness wounds
- Leg ulcers
- Surgical wounds
- Lacerations, abrasions and skin tears
- First- and second-degree burns

CONTRAINDICATIONS
- Patients with a known sensitivity to components of the gel
- Heavily draining wounds

CHANGE FREQUENCY
- Skintegrity may be left in place for up to 3 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- Stratasorb® Composite
- Bordered Gauze
- Suresite® 123+ Pad

References
1. Independent cytotoxicity study performed by Thomas J. Stephens & Associates, Inc. Study Number 93-0070 (AOL).
ORDERING INFORMATION

To order by the tube, add “H” to the end of the item number.

SKINTEGRITY HYDROGEL  *Ideal for clean wounds with minimal drainage*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC6102</td>
<td>Bellows Bottle, 1 oz. (29.5 ml)</td>
<td>A6248</td>
<td>30/cs</td>
</tr>
<tr>
<td>MSC6104</td>
<td>Tube, 4 oz. (118 ml)</td>
<td>A6248</td>
<td>12/cs</td>
</tr>
</tbody>
</table>

To order by the dressing, add “H” to the end of the item number.

SKINTEGRITY HYDROGEL IMPREGNATED GAUZE  *Ideal for cavity wounds*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC6022</td>
<td>2” x 2” (5.1 cm x 5.1 cm), 12-Ply</td>
<td>A6231</td>
<td>1/pk, 50 pk/cs</td>
</tr>
<tr>
<td>MSC6044</td>
<td>4” x 4” (10.2 cm x 10.2 cm), 12-Ply</td>
<td>A6231</td>
<td>1/pk, 30 pk/cs</td>
</tr>
<tr>
<td>MSC6144</td>
<td>4” x 4” (10.2 cm x 10.2 cm), 12-Ply</td>
<td>A6231</td>
<td>2/pk, 30 pk/cs</td>
</tr>
</tbody>
</table>

DID YOU KNOW?

Skintegrity Wound Cleanser is specially formulated for use with Skintegrity Hydrogel. This all purpose wound cleanser gently cleans wounds with a non-ionic surfactant. To learn more, see pg. 73.
SURESITE®
Transparent Film

INDICATIONS
- Partial-thickness wounds
- Full-thickness wounds (secondary dressing)
- Peripheral and central I.V. lines
- Skin tears
- Lacerations and abrasions
- To help prevent skin breakdown caused by friction to epidermis

CONTRAINDICATIONS
- Contraindicated as a primary dressing on wounds with moderate to heavy drainage

CHANGE FREQUENCY
- Suresite may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- N/A

DID YOU KNOW?
Sureprep® No-Sting skin protectant ensures proper adhesion and removal of Suresite® Transparent Film wound dressings. For more information about Sureprep No-Sting, see pg. 74.

Recommended Wound Conditions
- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

ABOUT SURESITE
- Traditional moisture vapor transmission rate (MVTR)
- Conformable
- Does not stick to itself
- Microporous technology
- Permits continuous observation
- Variety of delivery systems
### SURESITE WINDOW  
*An easy-to-use window frame delivery*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2302</td>
<td>2.38&quot; x 2.75&quot; (6 cm x 7 cm)</td>
<td>A6257</td>
<td>100/bx</td>
</tr>
<tr>
<td>MSC2304</td>
<td>4&quot; x 4.5&quot; (10.2 cm x 11.4 cm)</td>
<td>A6257</td>
<td>50/bx</td>
</tr>
</tbody>
</table>

To order by the box, add “Z” to the end of the item number.

To order by the dressing, add H to the end of the item number.

### SURESITE 123  
*Easy to apply transparent film*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2701</td>
<td>1.52&quot; x 1.52&quot; (3.9 cm x 3.9 cm)</td>
<td>A6257</td>
<td>100/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2703</td>
<td>2.4&quot; x 2.8&quot; (6.1 cm x 7.1 cm)</td>
<td>A6257</td>
<td>100/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2705</td>
<td>4&quot; x 4.8&quot; (10.2 cm x 12.2 cm)</td>
<td>A6257</td>
<td>50/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2706*</td>
<td>6&quot; x 8&quot; (15.2 cm x 20.3 cm)</td>
<td>A6258</td>
<td>25/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2710*</td>
<td>4&quot; x 10&quot; (10.2 cm x 25.4 cm)</td>
<td>A6258</td>
<td>25/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2712*</td>
<td>8&quot; x 12&quot; (20.3 cm x 30.5 cm)</td>
<td>A6259</td>
<td>25/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

* To order a box, add "ZZ" to the end of the item number.

### SURESITE 123+PAD  
*Easy delivery of an all-in-one cover dressing with absorption*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2603</td>
<td>2.4&quot; x 2.8&quot; (6.1 cm x 7.1 cm), 1.3&quot; x 1.6&quot; (3.3 cm x 4.1 cm) Pad</td>
<td>A6203</td>
<td>100/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2605</td>
<td>4&quot; x 4.8&quot; (10.2 cm x 12.2 cm), 2.4&quot; x 3.2&quot; (6.1 cm x 8.1 cm) Pad</td>
<td>A6203</td>
<td>50/bx, 4 bx/cs</td>
</tr>
<tr>
<td>MSC2610</td>
<td>3.5&quot; x 10&quot; (8.9 cm x 25.4 cm), 1.5&quot; x 8&quot; (3.8 cm x 20.3 cm) Pad</td>
<td>A6203</td>
<td>25/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>
## ORDERING INFORMATION

### SURESITE ROLL

*Allows for customization of length of transparent film*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2402</td>
<td>2” x 11yd. (5.1 cm x 10 m)</td>
<td>Pending</td>
<td>1 roll/bx, 12 bx/cs</td>
</tr>
<tr>
<td>MSC2404</td>
<td>4” x 11yd. (10.2 cm x 10 m)</td>
<td>Pending</td>
<td>1 roll/bx, 12 bx/cs</td>
</tr>
</tbody>
</table>

To order by the dressing, add "H" to the end of the item number.

### SURESITE I.V.

*Convenient, sized for I.V. sites*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2002</td>
<td>2” x 3” (5.1 cm x 7.6 cm)</td>
<td>A6257</td>
<td>100/bx</td>
</tr>
</tbody>
</table>

### SUREVIEW FILM FABRIC FRAME

*Easy to apply I.V. cover dressing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC2502</td>
<td>2.37” x 2.75” (6 cm x 7 cm)</td>
<td>A6257</td>
<td>50/bx</td>
</tr>
<tr>
<td>MSC2504</td>
<td>4” x 4.5” (10.2 cm x 11.4 cm)</td>
<td>A6257</td>
<td>25/bx</td>
</tr>
</tbody>
</table>
ORDERING INFORMATION

To order by the dressing, add "H" to the end of the item number.
To order by the box, add “Z” to the end of the item number.

<table>
<thead>
<tr>
<th>SURESITE MATRIX</th>
<th>Top layer allows you to trace wound margins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Number</td>
<td>Description</td>
</tr>
<tr>
<td>MSC2204</td>
<td>4&quot; x 4.5&quot; (10.2 cm x 11.4 cm)</td>
</tr>
<tr>
<td>MSC2206</td>
<td>6&quot; x 8&quot; (15.2 cm x 20.3 cm)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SURESITE 2 HANDLE</th>
<th>Traditional delivery system</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Number</td>
<td>Description</td>
</tr>
<tr>
<td>MSC2104</td>
<td>4&quot; x 5&quot; (10.2 cm x 13 cm)</td>
</tr>
</tbody>
</table>

Easy Removal Instructions for Minimizing Adhesive Trauma

To reduce patient discomfort when removing transparent film dressings, follow these instructions:

**Step 1:** Lift up two opposite sides of the transparent film

**Step 2:** Carefully stretch the dressing along the skin

**Step 3:** Continue this process until dressing is completely removed
HYALOMATRIX®
HYALURONIC ACID WOUND DEVICE

Recommended Wound Conditions
- Shallow
- Deep
- No/minimal drainage
- Moderate/heavy drainage
- Primary dressing
- Secondary dressing

ABOUT HYALOMATRIX
- Bilayered, sterile, flexible and conformable wound dressing
- Non-woven pad comprised entirely of HYAFF®, esterified hyaluronic acid
- Semipermeable silicone membrane, which controls water vapor loss
- Biodegradable matrix acts as a scaffold for cellular colonization and capillary growth
- Facilitates ordered reconstruction of the dermal tissue

INDICATIONS
- Pressure, venous, diabetic ulcers
- Partial and full-thickness wounds
- Chronic vascular ulcers
- Second-degree burns
- Tunneled/undermined wounds
- Surgical wounds (donor sites/grafts, post-Mohs surgery, post-laser surgery, podiatric, wound dehiscence)
- Trauma wounds (abrasions, lacerations, second-degree burns, skin tears)
- Draining wounds

CONTRAINDICATIONS
- Individuals with a hypersensitivity to hyaluronan and/or its derivatives and silicone

CHANGE FREQUENCY
- Removal of the silicone layer is recommended when the tissue underneath is healed, or ready for grafting, typically 14 to 21 days after application

RECOMMENDED SECONDARY DRESSINGS
- Versatel
- Sterile adhesive strips
ORDERING INFORMATION

To order by the dressing, add "H" to the end of the item number.

**HYALOMATRIX**  Hyaluronic acid based wound device

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSS4022</td>
<td>2&quot; x 2&quot; (5 cm x 5 cm)</td>
<td>Q4117</td>
<td>10 ea/bx</td>
</tr>
<tr>
<td>MSS4044</td>
<td>3.9&quot; x 3.9&quot; (10 cm x 10 cm)</td>
<td>Q4117</td>
<td>1 ea/bx</td>
</tr>
<tr>
<td>MSS4048</td>
<td>3.9&quot; x 7.8&quot; (10 cm x 20 cm)</td>
<td>Q4117</td>
<td>1 ea/bx</td>
</tr>
</tbody>
</table>

Percentage of Patients Reaching Re-epithelialization Over Time

“Hyalomatrix is capable of acting as a bioinductive, hyaluronan-based dermal substitute that stimulated the healing process in 217 (83%) of the treated ulcers. Twenty-six percent (26%) of wounds achieved 75% re-epithelialization within the 60-day follow-up period using only Hyalomatrix treatment.”

References

1. Wound Bed Preparation With a Dermal Substitute (Hyalomatrix® PA) Facilitates Re-epithelialization and Healing (The FAST Study), 2011.
INDICATIONS

- Pressure, venous, diabetic ulcers
- Partial and full-thickness wounds
- Ulcers caused by mixed vascular etiologies
- Burns
- Donor sites and other surface wounds
- Abrasions
- Traumatic wounds healing by secondary intention
- Dehisced surgical wounds

CONTRAINDICATIONS

- Active vasculitis or patients with known sensitivity to collagen
- Puracol Plus Ag+ only: patients with known sensitivity to silver, third degree burns

CHANGE FREQUENCY

- Puracol Plus and Puracol Plus Ag+ may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS

- Optifoam® Gentle
- Stratasorb® Composite
- Bordered Gauze

ABOUT PURACOL PLUS

- 100% collagen with a high degree of nativity\(^1,2\)
- High gel integrity\(^3\)
- Helps promote a natural wound environment conducive to wound healing
- Biodegradable
- Can be used in combination with negative pressure wound therapy (NPWT)\(^4\)

ABOUT PURACOL PLUS Ag+

In addition to all the benefits of Puracol Plus:

- Ionic silver provides antimicrobial barrier\(^5,6\)
- Non-staining

Recommended Wound Conditions

- Shallow
- No/minimal drainage
- Primary dressing
- Deep
- Moderate/heavy drainage
- Secondary dressing

Microscopic View\(^1\)

The intact super-structure provides strong evidence that the nativity of the collagen triple helix is preserved.

Puracol Plus MicroScaffold\(^1\)

The open porous structure increases the internal surface area for maximal interaction with wound fluids.

Microscopic View\(^1\)
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the dressing, add "H" to the end of the item number.

**PURACOL PLUS** *Ideal for wounds that are chronic or stalled*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC8622EP</td>
<td>2&quot; x 2.25&quot; (5.1 cm x 5.7 cm)</td>
<td>A6021</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC8644EP</td>
<td>4.2&quot; x 4.5&quot; (10.8 cm x 11.4 cm)</td>
<td>A6022</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC861X8EP</td>
<td>1&quot; x 8&quot; (2.5 cm x 20.3 cm) Rope</td>
<td>A6021</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC8588</td>
<td>8&quot; x 8&quot; (20.3 cm x 20.3 cm)</td>
<td>A6023</td>
<td>10/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>

**PURACOL PLUS Ag** *For stalled wounds when the antimicrobial properties of silver are desired*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC8722EP</td>
<td>2&quot; x 2.25&quot; (5.08 cm x 5.7 cm)</td>
<td>A6021</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC8744EP</td>
<td>4.2&quot; x 4.5&quot; (10.8 cm x 11.43 cm)</td>
<td>A6022</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC871X8EP</td>
<td>1&quot; x 8&quot; (2.5 cm x 20.3 cm) Rope</td>
<td>A6021</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC8488</td>
<td>8&quot; x 8&quot; (20.3 cm x 20.3 cm)</td>
<td>A6023</td>
<td>10/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>

Reduction in bacteria levels with Puracol Plus Ag*

<table>
<thead>
<tr>
<th>Test Organism</th>
<th>Log Reduction with Puracol Plus Ag*</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Staphylococcus aureus</em> (MRSA)</td>
<td>5.20</td>
</tr>
<tr>
<td><em>Enterobacter cloacae</em></td>
<td>5.08</td>
</tr>
<tr>
<td><em>Pseudomonas aeruginosa</em></td>
<td>5.18</td>
</tr>
<tr>
<td><em>Enterococcus faecalis</em> (VRE)</td>
<td>5.11</td>
</tr>
<tr>
<td><em>Escherichia coli</em></td>
<td>5.20</td>
</tr>
<tr>
<td><em>Staphylococcus epidermidis</em></td>
<td>5.08</td>
</tr>
</tbody>
</table>

Log reduction in bacteria levels (in vitro) was observed in testing of large populations of selected microorganisms, including MRSA, that came into contact with the Puracol Plus Ag+. (Method: AATCC-100)

References
2. Picrosirius Assay to Determine Relative Nativity of Two Collagenous Dressings, internal report.
4. Scott, R; Chakravarthy, D. “The use of a 100% native MicroScaffold™ Collagen in conjunction with NPWT therapy.” LifeCare Hospitals of Plano; Plano, TX. Presented at SAWC Fall Course, Baltimore, MD, September 2012.
## REVITALON®

Amniotic Membrane Allograft

### Recommended Wound Conditions

<table>
<thead>
<tr>
<th>Shallow</th>
<th>No/minimal drainage</th>
<th>Primary dressing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deep</td>
<td>Moderate/heavy drainage</td>
<td>Secondary dressing</td>
</tr>
</tbody>
</table>

### ABOUT REVITALON

- Living human donor origin
- Comprehensive donor vetting through MTF, the nation’s leading tissue bank
- Processed and packaged using aseptic technique, passing USP 71 sterility testing
- Comprised of both the amnion (inner layer) and chorion (outer layer) of the amniotic membrane
- Dehydrated format offers ready-anytime convenience at ambient storage temperature

### INDICATIONS

- For homologous use in the treatment of wounds

### CONTRAINDICATIONS

- The presence of severe vascular compromise, active or latent infection, or uncontrolled infection at the wound site may compromise the usefulness of the tissue.

### CHANGE FREQUENCY

- As needed

### RECOMMENDED SECONDARY DRESSINGS

- Versatel
- Sterile adhesive strips
ORDERING INFORMATION

REVITALON SHEET  
*Amniotic Membrane Allograft*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSS6011</td>
<td>0.8&quot; x 0.8&quot; (2 cm x 2 cm)</td>
<td>Q4157</td>
<td>1/ea</td>
</tr>
<tr>
<td>MSS6022</td>
<td>1.6&quot; x 1.6&quot; (4 cm x 4 cm)</td>
<td>Q4157</td>
<td>1/ea</td>
</tr>
<tr>
<td>MSS6023</td>
<td>1.6&quot; x 2.4&quot; (4 cm x 6 cm)</td>
<td>Q4157</td>
<td>1/ea</td>
</tr>
</tbody>
</table>

REVITALON DOTS  
*Amniotic Membrane Allograft*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSS6001</td>
<td>0.4&quot; (1 cm) diameter dots (x5)</td>
<td>Q4157</td>
<td>1 ea (5 dots total)</td>
</tr>
</tbody>
</table>

"We found that following one application of the amniotic membrane the wounds progressed to the process of natural healing and lead to full closure to our and the patients’ satisfaction in four of the five cases we studied"

BORDERED GAUZE
STRATASORB® COMPOSITE
Adhesive Island Wound Dressings

**INDICATIONS**
- Pressure ulcers
- Partial and full-thickness wounds
- Incision sites

**CONTRAINDICATIONS**
- Third-degree burns
- Patients with a known sensitivity to components of the dressing

**CHANGE FREQUENCY**
- Change the dressing as indicated by the amount of drainage or as frequently as the primary dressing indicates

**RECOMMENDED SECONDARY DRESSINGS**
- N/A

**ABOUT COVER DRESSINGS**
- Deluxe soaker pad
- Non-woven adhesive border
- Waterproof backing (Stratasorb)
- Water resistant backing (Bordered Gauze)
- Ideal for incision sites

**Recommended Wound Conditions**
- Shallow
- No/minimal drainage
- Primary dressing
- Deep*
- Moderate/heavy drainage*
- Secondary dressing

* As a secondary dressing

**Recommended Wound Conditions**
- Shallow
- No/minimal drainage
- Primary dressing
- Deep*
- Moderate/heavy drainage*
- Secondary dressing

* As a secondary dressing
ORDERING INFORMATION
To order by the box, add “Z” to the end of the item number.
To order by the dressing, add “H” to the end of the item number.

**STRATASORB COMPOSITE** *Waterproof, convenient secondary dressing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC3044</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm), 2.5&quot; x 2&quot; (6.4 cm x 5.1 cm) Pad</td>
<td>A6203</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC3066</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm), 4&quot; x 4&quot; (10.2 cm x 10.2 cm) Pad</td>
<td>A6203</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC3068</td>
<td>6&quot; x 7.5&quot; (15.2 cm x 19.1 cm), 4&quot; x 6&quot; (10.2 cm x 15.2 cm) Pad</td>
<td>A6204</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC30410</td>
<td>4&quot; x 10&quot; (10.2 cm x 25.4 cm), 2&quot; x 8&quot; (5.1 cm x 20.3 cm) Pad</td>
<td>A6203</td>
<td>10/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC30414</td>
<td>4&quot; x 14&quot; (10.2 cm x 35.6 cm), 2&quot; x 12&quot; (5.1 cm x 30.5 cm) Pad</td>
<td>A6204</td>
<td>10/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

**BORDERED GAUZE** *Water resistant, easy-to-use secondary dressing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC3222</td>
<td>2&quot; x 2&quot; (5.1 cm x 5.1 cm), 1&quot; x 1&quot; (2.5 cm x 2.5 cm) Pad</td>
<td>A6219</td>
<td>15/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC3244</td>
<td>4&quot; x 4&quot; (10.2 cm x 10.2 cm), 2.5&quot; x 2.5&quot; (6.4 cm x 6.4 cm) Pad</td>
<td>A6219</td>
<td>15/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC3245</td>
<td>4&quot; x 5&quot; (10.2 cm x 12.7 cm), 2&quot; x 2.5&quot; (5.1 cm x 6.4 cm) Pad</td>
<td>A6219</td>
<td>15/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC3248</td>
<td>4&quot; x 8&quot; (10.2 cm x 20.3 cm), 2&quot; x 6&quot; (5.1 cm x 15.2 cm) Pad</td>
<td>A6219</td>
<td>15/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC3266</td>
<td>6&quot; x 6&quot; (15.2 cm x 15.2 cm), 4&quot; x 4&quot; (10.2 cm x 10.2 cm) Pad</td>
<td>A6220</td>
<td>15/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC32410</td>
<td>4&quot; x 10&quot; (10.2 cm x 25.4 cm), 2&quot; x 8&quot; (5.1 cm x 20.3 cm) Pad</td>
<td>A6219</td>
<td>15/bx, 10 bx/cs</td>
</tr>
<tr>
<td>MSC32414</td>
<td>4&quot; x 14&quot; (10.2 cm x 35.6 cm), 2&quot; x 12&quot; (5.1 cm x 30.5 cm) Pad</td>
<td>A6220</td>
<td>15/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>
**COFLEX® TLC**
Two-Layer Compression Bandage System

**Recommended Use**
- Venous Leg Ulcers

**ABOUT COFLEX TLC**
- Effective therapeutic compression
- Low profile system easily fits under clothing and footwear
- Absorbent padding bandage designed to wick away moisture and control odor
- Stocking included to ease movement
- Cohesive layer tears by hand
- Patient information card included in every kit
- Extra Long kit available for larger legs
- Easy and consistent application method

**INDICATIONS**
- To deliver therapeutic compression to manage venous disease and associated edema

**CONTRAINdications**
- Patients with severe arterial disease

**CHANGE FREQUENCY**
- CoFlex® TLC compression system may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**
- N/A

**Average Sub-Bandage Pressure (mm/Hg)**

<table>
<thead>
<tr>
<th></th>
<th>CoFlex TLC</th>
<th>CoFlex TLC Lite</th>
</tr>
</thead>
<tbody>
<tr>
<td>37.7</td>
<td>27.5</td>
<td></td>
</tr>
</tbody>
</table>

CoFlex TLC systems consistently deliver 37.7 mm/Hg +/- 2.1 mm/Hg.* What’s more, this level of compression can remain within the effective range up to seven days.

*Source: Andover Healthcare Study #1306-A. Data on file. Actual compression levels will depend, in part, on limb diameter and therefore vary between patients.
## ORDERING INFORMATION

To order one kit, add “H” to the end of the item number.

### COFLEX TLC  
*For therapeutic venous compression*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>AND7800</td>
<td>CoFlex TLC Kit</td>
<td></td>
<td>8 kits/cs</td>
</tr>
</tbody>
</table>

#### Component

1. **Absorbent Padding**  
   - 4” x 3.4 yd. (10 cm x 3.1 m)  
   - A6441  
   - 8 kits/cs

2. **Short-Stretch Cohesive**  
   - 4” x 5.1 yd. (10 cm x 4.7 m)  
   - A6454  
   - 8 kits/cs

### COFLEX TLC XL  
*For larger and/or longer limbs*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>AND7800XL</td>
<td>CoFlex TLC XL Kit</td>
<td></td>
<td>8 kits/cs</td>
</tr>
</tbody>
</table>

#### Component

1. **Absorbent Padding**  
   - 4” x 5.4 yd. (10 cm x 4.9 m)  
   - A6441  
   - 8 kits/cs

2. **Short-Stretch Cohesive**  
   - 4” x 7 yd. (10 cm x 6.3 m)  
   - Stretched  
   - A6454  
   - 8 kits/cs

### COFLEX TLC LITE  
*For lighter compression therapy*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>AND7802</td>
<td>CoFlex TLC Lite Kit</td>
<td></td>
<td>8 kits/cs</td>
</tr>
</tbody>
</table>

#### Component

1. **Absorbent Padding**  
   - 4” x 3.4 yd. (10 cm x 3.1 m)  
   - A6441  
   - 8 kits/cs

2. **Short-Stretch Cohesive**  
   - 4” x 5.1 yd. (10 cm x 4.7 m)  
   - Stretched  
   - A6454  
   - 8 kits/cs
**FOURFLEX®**  
**THREEFLEX®**  
Multi-Layer Compression Bandage System

**Recommended Use**  
- Venous Leg Ulcers

**ABOUT FOURFLEX AND THREEFLEX**

- Effective therapeutic compression  
- Extended wear time  
- Absorbs drainage  
- Educational packaging  
- Extra long kit available for larger legs

**ABI Chart**

To determine the Ankle Brachial Index (ABI), divide the ankle systolic pressure by the brachial systolic pressure.

$$\frac{\text{Ankle Pressure}}{\text{Brachial Pressure}} = \text{ABI}$$

**Interpretation of the Ankle Brachial Index**

<table>
<thead>
<tr>
<th>ABI Range</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greater than 1.3</td>
<td>Abnormally high range (more studies are needed)</td>
</tr>
<tr>
<td>0.95 to 1.3</td>
<td>Normal range</td>
</tr>
<tr>
<td>0.80 to 0.95</td>
<td>Compression is considered safe at this level</td>
</tr>
<tr>
<td>0.50 to 0.80</td>
<td>Indicates mild to moderate arterial disease, compression should only be used under direct medical supervision</td>
</tr>
<tr>
<td>Below 0.5</td>
<td>Severe arterial insufficiency, compression is contraindicated</td>
</tr>
</tbody>
</table>

**INDICATIONS**

- To deliver compression to manage venous disease and associated edema

**CONTRAINDICATIONS**

- Patients with severe arterial disease

**CHANGE FREQUENCY**

- Multi-layer compression bandages may be left in place for up to 7 days  
- Dressing change frequency will depend on amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**

- N/A
# ORDERING INFORMATION

To order one kit, add “H” to the end of the item number.

## FOURFLEX
For the treatment of chronic venous insufficiency

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC4400</td>
<td>FourFlex Kit</td>
<td></td>
<td>8 kits/cs</td>
</tr>
</tbody>
</table>

Component

1) Padding     4” x 4 yd. (10 cm x 3.6 m)  A6441
2) Light Conforming 4” x 4.9 yd. (10 cm x 4.5 m)  A6449
3) Compression 4” x 9.5 yd. (10 cm x 8.7 m)  Stretched  A6452
4) Cohesive    4” x 6.9 yd. (10 cm x 6.3 m)  Stretched  A6454
5) Medi-Strips

## FOURFLEX XL
For the treatment of chronic venous insufficiency

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC4400XL</td>
<td>FourFlex Kit</td>
<td></td>
<td>8 kits/cs</td>
</tr>
</tbody>
</table>

Component

1) Padding     4” x 5 yd. (10 cm x 4.6 m)  25% longer  A6441
2) Conforming   4” x 6.3 yd. (10 cm x 5.7 m)  A6449
                     Stretched. 29% longer
3) Compression  4” x 12.3 yd. (10 cm x 11.2 m)  A6452
                     Stretched. 29% longer
4) Cohesive     4” x 8.9 yd. (10 cm x 8.1 m)  A6454
                     Stretched. 29% longer
5) Medi-Strips

## THREEFLEX
For lighter compression or for mixed etiology

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC4300</td>
<td>ThreeFlex Kit</td>
<td></td>
<td>8 kits/cs</td>
</tr>
</tbody>
</table>

Component

1) Padding     4” x 4 yd. (10 cm x 3.6 m)  A6441
2) Light Conforming 4” x 4.9 yd. (10 cm x 4.5 m)  A6449
3) Cohesive    4” x 6.9 yd. (10 cm x 6.3 m)  A6454
4) Medi-Strips
GENTAC®
Silicone Fixation Tape

Recommended Use
- Dressing Retention

ABOUT GENTAC
- Silicone adhesive
- Gentle for patient
- Can be cut to size
- Easy to apply
- Waterproof

INDICATIONS
- To secure primary or secondary dressings
- To secure gastrostomy tubes and other feeding tubes

CONTRAINDICATIONS
- Contraindicated as a primary dressing

CHANGE FREQUENCY
- Gentac may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
- N/A

ORDERING INFORMATION
To order by the roll, add “H” to the end of the item number.

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1583</td>
<td>0.8” x 3.3 yd. (2 cm x 3 m)</td>
<td>A4452</td>
<td>12 rolls/ bx</td>
</tr>
<tr>
<td>MSC1585</td>
<td>2” x 5 yd. (5.1 cm x 12.7 m)</td>
<td>A4452</td>
<td>6 rolls/ bx</td>
</tr>
</tbody>
</table>

* Test data on file (independent lab).
MARATHON®
Cyanoacrylate Skin Protectant

ABOUT MARATHON
- Robust, flexible and long-lasting
- Non-stinging: contains no solvents or activators
- Protects from the effects of friction
- Protects from moisture (urine, exudate, sweat, and other bodily fluids) that can cause maceration
- Can be used on intact or damaged skin
- Fast drying
- Breathable

INDICATIONS
Protects intact or damaged skin from:
- Incontinence
- Moisture
- Bodily fluids
- Shear and adhesive stripping

CONTRAINDICATIONS
Do not apply directly to:
- Deep, open, bleeding, or chronic wounds
- Second or third-degree burns
- Infected areas

CHANGE FREQUENCY
- Up to 3 days, reapply as needed

RECOMMENDED SECONDARY DRESSINGS
- N/A

ORDERING INFORMATION

MARATHON LIQUID SKIN PROTECTANT  For powerful skin protection

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC093005</td>
<td>0.5 g ampule</td>
<td>A6250 (Protectant)</td>
<td>10/ bx</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A5120 (Skin prep)</td>
<td></td>
</tr>
<tr>
<td>MSC093001</td>
<td>0.5 g ampule</td>
<td>A6250 (Protectant)</td>
<td>5/ bx</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A5120 (Skin prep)</td>
<td></td>
</tr>
</tbody>
</table>
**MEDFIX™**
Dressing Retention Tape

**Recommended Use**
- Dressing Retention

**ABOUT MEDFIX**
- Low sensitivity adhesive, gentle for the patient
- Medfix has a printed s-curve release liner
- Medfix EZ is linerless and perforated
- Water resistant

**INDICATIONS**
- To secure primary dressings
- To secure gastrostomy tubes and other feeding tubes

**CONTRAINDICATIONS**
- Contraindicated as a primary dressing

**CHANGE FREQUENCY**
- Medfix may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**
- N/A
### ORDERING INFORMATION

**MEDFIX**  *For flexibility and customized sizing*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC4002</td>
<td>2&quot; x 11 yd. (5.1 cm x 10 m)</td>
<td>A4452</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC4004</td>
<td>4&quot; x 11 yd. (10.2 cm x 10 m)</td>
<td>A4452</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC4006</td>
<td>6&quot; x 11 yd. (15.2 cm x 10 m)</td>
<td>A4452</td>
<td>1 roll/bx</td>
</tr>
</tbody>
</table>

To order by the roll, add “H” to the end of the item number.

**MEDFIX EZ**  *Linerless with 2” perforations*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC4102</td>
<td>2&quot; x 11 yd. (5.1 cm x 10 m)</td>
<td>A4452</td>
<td>12 rolls/bx</td>
</tr>
<tr>
<td>MSC4104</td>
<td>4&quot; x 11 yd. (10.2 cm x 10 m)</td>
<td>A4452</td>
<td>12 rolls/bx</td>
</tr>
<tr>
<td>MSC4106</td>
<td>6&quot; x 11 yd. (15.2 cm x 10 m)</td>
<td>A4452</td>
<td>12 rolls/bx</td>
</tr>
<tr>
<td>MSC4124</td>
<td>4&quot; x 2 yd. (10.2 cm x 1.8 m)</td>
<td>A4452</td>
<td>12 rolls/bx</td>
</tr>
</tbody>
</table>
MEDIGRIP™
Elastic Tubular Bandage

ABOUT MEDIGRIP
• Provides excellent support for joints
• Easy to apply and reapply
• Wide range of applications
• Good for securing dressings
• Can be used as mild compression when doubled

INDICATIONS
• Edema
• Treatment of chronic venous insufficiency
• Dislocations
• Sprains

CONTRAINDICATIONS
• None*

CHANGE FREQUENCY
• Medigrip may be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

RECOMMENDED SECONDARY DRESSINGS
• N/A

Recommended Uses
- Dressing Retention
- Light compression

Compression Testing of Bandages
Based on principles contained in BS 6612

<table>
<thead>
<tr>
<th>Test Material</th>
<th>Test</th>
<th>Limb Circumference (cm)</th>
<th>Pressure (mm/Hg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medigrip</td>
<td>1</td>
<td>17.2</td>
<td>7.2</td>
</tr>
<tr>
<td>Tubigrip</td>
<td>1</td>
<td>17.2</td>
<td>5.8</td>
</tr>
<tr>
<td>Medigrip</td>
<td>2</td>
<td>18.7</td>
<td>7.0</td>
</tr>
<tr>
<td>Tubigrip</td>
<td>2</td>
<td>18.7</td>
<td>6.1</td>
</tr>
</tbody>
</table>

Summary:
Although the statistical analysis indicated that the pressures produced by the two products are different, this difference is unlikely to prove significant in the clinical situation.

Independent study performed by SMTL, Bridgend, Wales

*CAUTION: This product contains natural rubber latex which may cause allergic reactions

**DIMES SUPPORTIVE PRODUCTS**

ORDERING INFORMATION

**MEDIGRIP 11 yards (10 meters) in length**

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Size</th>
<th>Width</th>
<th>Application</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9500</td>
<td>A</td>
<td>1.75&quot; (4.5 cm)</td>
<td>Infant feet and arms</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC9501</td>
<td>B</td>
<td>2.5&quot; (6.3 cm)</td>
<td>Small hands and limbs</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC9502</td>
<td>C</td>
<td>2.625&quot; (6.8 cm)</td>
<td>Adult hands, arms or legs</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC9503</td>
<td>D</td>
<td>3&quot; (7.5 cm)</td>
<td>Large arms or legs</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC9504</td>
<td>E</td>
<td>3.5&quot; (8.75 cm)</td>
<td>Legs or small thighs</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC9505</td>
<td>F</td>
<td>4&quot; (10 cm)</td>
<td>Large knees or thighs</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
<tr>
<td>MSC9506</td>
<td>G</td>
<td>4.75&quot; (12 cm)</td>
<td>Large thighs</td>
<td>A6457</td>
<td>1 roll/bx</td>
</tr>
</tbody>
</table>

To order by the dressing, add “H” to the end of the item number.

**MEDIGRIP 1 yard (0.91 meter) in length**

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Size</th>
<th>Width</th>
<th>Application</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC9504YD</td>
<td>E</td>
<td>3.5&quot; (8.75 cm)</td>
<td>Legs or small thighs</td>
<td>A6457</td>
<td>30/cs</td>
</tr>
<tr>
<td>MSC9505YD</td>
<td>F</td>
<td>4&quot; wide (10 cm)</td>
<td>Large knees or thighs</td>
<td>A6457</td>
<td>30/cs</td>
</tr>
<tr>
<td>MSC9506YD</td>
<td>G</td>
<td>4.75&quot; wide (12 cm)</td>
<td>Large thighs</td>
<td>A6457</td>
<td>30/cs</td>
</tr>
</tbody>
</table>

**MEDIGRIP SIZING CHART (For compression, use a double layer of Medigrip)**

<table>
<thead>
<tr>
<th>LIMB MEASUREMENT*</th>
<th>COMPRESSION**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inches</td>
<td>Centimeters</td>
</tr>
<tr>
<td>4&quot; – 5.3125&quot;</td>
<td>10 cm – 13.5 cm</td>
</tr>
<tr>
<td>5.3125&quot; – 5.3125&quot;</td>
<td>13.5 cm – 15 cm</td>
</tr>
<tr>
<td>5.3125&quot; – 9.625&quot;</td>
<td>15 cm – 24.5 cm</td>
</tr>
<tr>
<td>9.625&quot; – 14&quot;</td>
<td>24.5 cm – 35.5 cm</td>
</tr>
<tr>
<td>14&quot; – 17.6875&quot;</td>
<td>35.5 cm – 45 cm</td>
</tr>
<tr>
<td>17.6875&quot; – 19.875&quot;</td>
<td>45 cm – 50.5 cm</td>
</tr>
<tr>
<td>19.875&quot; – 23.875&quot;</td>
<td>50.5 cm – 60.7 cm</td>
</tr>
<tr>
<td>23.875&quot; – 27.6875&quot;</td>
<td>60.7 cm – 70.3 cm</td>
</tr>
</tbody>
</table>

*For a full arm coverage, measure the largest part of the forearm. For a full leg or below the knee coverage, measure the widest point of the calf. And, for the hand, measure around metacarpophalangeal joint.

**Low = 5-10 mm Hg Mercury (for General edema) Medium = 10-20 mm Hg (for Varicose conditions/post burn scarring) High = 20-30 mm Hg (for Soft tissue injuries/joint effusions)**
NE1® WOUND ASSESSMENT TOOL
Measurement/Assessment Device

Recommended Use
- Measure and Assess all types of wounds

ABOUT NE1 WOUND ASSESSMENT TOOL

- Easy to use color matching technique
- Reduces errors and promotes accurate wound assessment
- Standardizes wound documentation
- Free online education

INDICATIONS
- Wound assessment to assist with wound evaluation

CONTRAINDICATIONS
- None

CHANGE FREQUENCY
- One time use, during each wound evaluation
- Upon admission and discharge at minimum

Improved Wound Assessment Accuracy

The study showed a statistically significant improvement in wound assessment. Overall, the clinicians more than doubled their accuracy with the help of the NE1 Wound Assessment Tool.

References
ORDERING INFORMATION

NE1 WOUND ASSESSMENT TOOL Accurate Identification, consistent documentation

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSCNE1TOOL</td>
<td>Wound Assessment Tool</td>
<td>100/bx</td>
</tr>
<tr>
<td>MSCNE1TOOLPK</td>
<td>Wound Assessment Tool</td>
<td>10/pk</td>
</tr>
</tbody>
</table>

This comprehensive documentation form simplifies the assessment and documentation process. A PDF can be found at www.MedlineNE1.com
PINC™
Zinc Oxide Adhesive Tape

Recommended Use
• Dressing Retention

ABOUT PINC™
• Zinc oxide adhesive
• Gentle for the patient
• Easy-tear design
• Waterproof

INDICATIONS
• To secure primary or secondary dressings
• To secure medical devices, such as an ostomy pouch

CONTRAINDICATIONS
• Contraindicated as a primary dressing

USE FREQUENCY
• Pinc may be left in place for up to 7 days
• Dressing change frequency will depend on amount of drainage

DID YOU KNOW?
Sureprep® No-Sting skin protectant ensures proper adhesion and removal of adhesive island wound dressings. For more information about Sureprep No-Sting, see pg. 74.

ORDERING INFORMATION
To order by the roll, remove “CS” from the end of the item number.

<table>
<thead>
<tr>
<th>PINC™ Zinc Oxide Adhesive Tape</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Number</td>
</tr>
<tr>
<td>OMAM55CS</td>
</tr>
<tr>
<td>OMAM111CS</td>
</tr>
<tr>
<td>OMAM222CS</td>
</tr>
</tbody>
</table>
SKINTEGRITY®
Wound Cleanser

**Recommended Use**
- Cleansing all types of wounds

**ABOUT SKINTEGRITY WOUND CLEANSER**
- Easy cleansing
- Adjustable trigger, PSI of 8.6 at 3"
- Within AHCPR guidelines

**INDICATIONS**
To clean a wide variety of wounds including:
- Pressure ulcers
- Partial and full-thickness wounds
- Infected and non-infected wounds

**CONTRAINDICATIONS**
- Patients with a known sensitivity to ingredients in Skintegrity Wound Cleanser

**USE FREQUENCY**
- With every dressing change

**RECOMMENDED SECONDARY DRESSINGS**
- N/A

**DID YOU KNOW?**
Skintegrity Wound Cleanser is specially formulated for use with Skintegrity Hydrogel. To learn more, see pg. 46.

**ORDERING INFORMATION**
To order by the bottle, add “H” to the end of the item number.

**SKINTEGRITY WOUND CLEANSER** For wound cleansing

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC6008</td>
<td>8 oz. (236 ml) Spray Bottle</td>
<td>6/cs</td>
</tr>
<tr>
<td>MSC6016</td>
<td>16 oz. (472 ml) Spray Bottle</td>
<td>6/cs</td>
</tr>
</tbody>
</table>
SUREPREP®
SUREPREP® NO-STING
Skin Protectants

**Recommended Uses**
- Protection from adhesive trauma
- Protection from corrosive fluids

**ABOUT SUREPREP AND SUREPREP NO-STING**
- Protects from adhesive stripping
- Safe for delicate skin
- Outperformed 3M Cavilon® in controlled study
- Fast drying
- Vapor permeable
- Creates a waterproof barrier on periwound skin
- Protection from friction and body fluids
- Transparent

**INDICATIONS**
To be applied to intact or damage skin in order to provide a primary barrier against:
- Bodily wastes
- Fluids
- Adhesives

**CONTRAINDICATIONS**
Not to be used:
- On infected areas of skin
- Near the eyes
- As the only covering in situations that require additional dressing protection from bacterial contamination/penetration, e.g. intravenous therapy catheter sites and full- or partial-thickness wounds

**CHANGE FREQUENCY**
- Up to 72 hours and with every dressing change

**RECOMMENDED SECONDARY DRESSINGS**
- N/A

---

**Transepidermal Water-Loss (TEWL)**

On day 4 and day 5 subjects using Sureprep No-Sting experienced significantly less water loss than subjects using 3M Cavilon No-Sting

**References**
1. Chakravarthy D, Falconio-West M. A Randomized, Controlled Trial of Two Sting Free Polymeric Skin Barrier Products, One Water Based, the Other Solvent Based. Presented at Clinical Symposium on Advances in Skin and Wound Care. Nashville, TN. 2007.
2. Test data on file (independent lab).
ORDERING INFORMATION

To order by the box, add “Z” to the end of the item number.
To order by the wipe, add “H” to the end of the item number.

SUREPREP NO-STING  *Ideal for damaged or delicate skin, alcohol free*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1505</td>
<td>No-Sting Protective Wipes</td>
<td>A5120, A6250</td>
<td>50/bx, 10 bx/cs</td>
</tr>
</tbody>
</table>

SUREPREP NO-STING WAND  *For damaged or delicate skin, alcohol free*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1510</td>
<td>No-Sting Wand Applicator, 1 ml</td>
<td>A5120, A6250</td>
<td>25/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC1513</td>
<td>No-Sting Wand Applicator, 3 ml</td>
<td>A5120, A6250</td>
<td>25/bx, 4 bx/cs</td>
</tr>
</tbody>
</table>

SUREPREP NO-STING SPRAY  *For damaged or delicate skin, alcohol free*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1528</td>
<td>Sureprep No-Sting Spray, 28 ml</td>
<td>A4369, A6250</td>
<td>12/cs</td>
</tr>
</tbody>
</table>

SUREPREP  *Ideal for routine periwound skin protection, contains alcohol*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1500</td>
<td>Skin Protective Wipes</td>
<td>A5120, A6250</td>
<td>50/bx, 20 bx/cs</td>
</tr>
<tr>
<td>MSC1500PK</td>
<td>Skin Protective Wipes</td>
<td>A5120, A6250</td>
<td>10/pk</td>
</tr>
</tbody>
</table>

ADHESIVE TAPE REMOVER PADS

*Use to ease removal of adhesive tape and adhesive residue*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDS090855</td>
<td>Adhesive Remover Pad</td>
<td>100/bx, 1000/cs</td>
</tr>
</tbody>
</table>
UNNA-Z™

Unna-Boot

Recommended Use
Venous Leg Ulcers

ABOUT UNNA-Z

• Improved knitted design
• Maintains a moist healing environment
• Impregnated with zinc oxide*
• Provides light compression
• Inner plastic core for easy application

INDICATIONS
• Venous leg ulcers

CONTRAINDICATIONS
• Patients with a known sensitivity to components (zinc and/or calamine)

CHANGE FREQUENCY
• Unna-Z may be left in place for up to 7 days, depending on drainage

RECOMMENDED SECONDARY DRESSINGS
• Compression Coflex LF2 - MDS089004
• Bulkee® Gauze Wrap – NON25865

DID YOU KNOW?

Unna boots are usually covered with a cohesive bandage such as Coflex LF2.

*Items NONUNNA3 and NONUNNA4 contain calamine and zinc oxide.
### ORDERING INFORMATION

To order by the dressing, add “H” to the end of the item number.

#### UNNA-Z

*Maintains a moist healing environment and provides light compression for venous leg ulcers*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONUNNA13</td>
<td>3” x 10 yds (7.6 cm x 9.1 m)</td>
<td>A6456</td>
<td>12/cs</td>
</tr>
<tr>
<td>NONUNNA14</td>
<td>4” x 10 yds (10.2 cm x 9.1 m)</td>
<td>A6456</td>
<td>12/cs</td>
</tr>
</tbody>
</table>

#### UNNA-Z WITH CALAMINE

*Maintains a moist healing environment and provides light compression for venous leg ulcers*

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONUNNA3</td>
<td>3” x 10 yds (7.6 cm x 9.1 m)</td>
<td>A6456</td>
<td>12/cs</td>
</tr>
<tr>
<td>NONUNNA4</td>
<td>4” x 10 yds (10.2 cm x 9.1 m)</td>
<td>A6456</td>
<td>12/cs</td>
</tr>
</tbody>
</table>
VERSATEL®
Silicone Contact Layer

**INDICATIONS**
- Dry to heavily draining abrasions
- Partial and full-thickness wounds
- Venous ulcers or pressure ulcers
- Skin tears
- First- and second-degree burns
- Blisters, cuts and lacerations
- Surgical and trauma wounds

**CONTRAINDICATIONS**
- Third-degree burns
- Individuals with a known sensitivity to silicone
- Not for surgical implantation

**CHANGE FREQUENCY**
- Versatel may be left in place for up to 7 days
- Dressing change frequency will depend on amount of drainage

**RECOMMENDED SECONDARY DRESSINGS**
- Stratasorb® Composite
- Optifoam® Adhesive
- Maxorb® Extra

---

**ABOUT VERSATEL**
- Silicone-based atraumatic adhesive
- Flexible and pliable to conform to body contours and improve comfort
- Reduces potential trauma from secondary dressing wound adherence
- Minimizes pain during removal
- Channels allow fluid to easily transfer to an absorbent dressing
- Translucent for easy wound visualization

**Fluid Transferred Through Versatel**
Versatel is designed to allow wound fluid to easily transfer into a secondary dressing.¹

---

**Recommended Uses**
- To prevent dressing adhesion to the wound

**REFERENCES**
1. Independent laboratory testing. Test reports on file.

---

A typical highly exudating wound drains over 10 ml of fluid per day.²

In an *in vitro* study that simulates the drainage of a wound, Versatel was shown to be an efficient transfer layer for fluid. Versatel allowed an average of 16.2 ml of fluid to pass through during 2.5 hours, which is equal to 155.52 ml per day.³
**ORDERING INFORMATION**

To order by the box, add “Z” to the end of the item number. To order by the each, add “H” to the end of the item number.

---

**VERSATEL Ideal for painful ulcers**

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>HCPCS</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSC1723EP</td>
<td>2” x 3” (5.1 cm x 7.6 cm)</td>
<td>A6206</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC1734EP</td>
<td>3” x 4” (7.6 cm x 10.2 cm)</td>
<td>A6206</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC1747EP</td>
<td>4” x 7” (10.2 cm x 17.8 cm)</td>
<td>A6207</td>
<td>10/bx, 5 bx/cs</td>
</tr>
<tr>
<td>MSC17812EP</td>
<td>8” x 12” (20.3 cm x 30.5 cm)</td>
<td>A6208</td>
<td>5/bx, 5 bx/cs</td>
</tr>
</tbody>
</table>

---

**Easy Application Instructions**

**Step 1:** Clean and dry periwound area. Remove Versatel from package. Remove liner from one side of the dressing.

**Step 2:** Place dressing directly on wound and smooth into place.

**Step 3:** Remove second liner. Cover with an appropriate secondary absorbent dressing such as Stratasorb®. Versatel can be used under compression dressings.
THERAPEUTIC SUPPORT SURFACES

Recommended Uses

- Pressure Redistribution
- Shear Reduction
- Friction Reduction
- Heat Distribution

ABOUT THERAPEUTIC SUPPORT SURFACES

To provide solutions for the entire continuum of care, Medline offers a full line of pressure redistribution products for acute, long-term, and home care use.

ACUTE CARE For more Information, see our Acute Care Support Surfaces Brochure (LIT58R)

**THERATECH MATTRESS** *Prevention through Treatment of Stage II Wounds*
Resilient load-bearing cells independently conform to the body to redistribute pressure and reduce shear, while air channels reduce heat and moisture.

**EQUALIZAIRE MATTRESS** *Prevention through Treatment of Stage IV Wounds*
The dynamic, self-adjusting non-powered mattress can become an alternating pressure mattress with the addition of the optional pump.

**ADVANTAGE O.R. TABLE** *Prevention through Treatment of Stage II Wounds*
Advanced surfaces optimize pressure redistribution during surgery on the O.R. table.

**STRETCHER PADS** *Prevention through Treatment of Stage II Wounds*
Advanced surfaces optimize pressure redistribution during transportation to and from the operating room.

**HEEL PROTECTION** *For Prevention through Treatment of Stage IV Wounds*
Innovative devices elevate the heels and significantly reduce pressure, friction and shear.
LONG-TERM CARE  For more information, see our Long-Term Care Support Surfaces Brochure (LIT162)

ADVANTAGE CONTOUR MATTRESSES  Prevention through Treatment of Stage II Wounds
The unique contour shape of the high-resiliency foam helps it to completely conform to the resident’s body and cradle high-risk areas.

POWERED MATTRESSES/OVERLAYS  Prevention through Treatment of Stage IV Wounds
Choose from a wide variety of options for every major therapeutic modality, including alternating pressure, low air loss, true low air loss and self-adjusting therapies.

WHEELCHAIR CUSHIONS  Prevention through Treatment of Stage IV Wounds
From Medline brand to popular name brands, we offer a wide variety of cushions designed to meet specific needs of today’s residents.

HEEL PROTECTION DEVICES  Prevention through Treatment of Stage IV Wounds
Medline’s top-quality heel protection devices elevate heels and significantly reduce pressure, friction, and shear.

HME DEALER  For more information, see our HME Dealer Support Surfaces Brochure (LIT459)

GROUP I TREATMENT PRODUCTS  Prevention through Treatment of Stage II Wounds
A variety of prevention products are specifically tailored to HME Dealers, including static air overlays, alternating-pressure overlays, gel overlays and therapeutic homecare mattresses.

GROUP 2 TREATMENT PRODUCTS  Treatment of Stages II through IV & Surgical Wounds
A variety of treatment options cater to HME Dealers, including alternating pressure, low air loss, true low air loss and self-adjusting therapies.

WHEELCHAIR CUSHIONS/BEDSIDE SAFETY/ACCESSORIES  Prevention through Treatment of Stage IV Wounds
A wide selection of Medline-brand and popular name-brand cushions are specifically designed to meet the needs of today’s HME Dealer.
WOUND & SKIN CARE REFERENCE GUIDE

A Valuable Resource for Physicians and Clinicians

To provide the best care possible, you need more than just a supplier. You need a partner who delivers information and assistance.

THE WOUND & SKIN REFERENCE GUIDE

Our team of experienced WOCNs has compiled this pocket-sized reference guide. This comprehensive resource offers step-by-step clinical guidance for wound prevention and management.

SEE INSIDE FOR:

- Clinical Team
- Wound and Healing Principles and Assessment
- Wound Bed Preparation
- Local Wound Care and Treatment Options
- DIMES
- Wound Care Product Categories and Cross Reference
- Today’s Wound Care Products
- Today’s Skin Care Products

Ask your Medline representative how to get your copy of the Wound & Skin Reference Guide today!
Classification of Tissue Destruction in Pressure Ulcers

Wounds not caused by pressure such as skin tears, donor sites, vascular ulcers, surgical wounds and burns are described as partial or full-thickness to indicate the depth of tissue destruction.

- **Partial-Thickness (like Stage II)**
- **Full-Thickness (like Stage III or IV)**

Ulcers caused by pressure are staged. This is a method of classifying pressure ulcers, describing the degree of tissue damage observed. According to the NPUAP, a pressure ulcer is a localized injury to the skin and/or underlying tissue usually over a bony prominence, as a result of pressure, or pressure in combination with shear and/or friction. A number of contributing or confounding factors are also associated with pressure ulcers; the significance of these factors is yet to be elucidated. *NPUAP, 2007*

**STAGE I**
- Intact skin with non-blanchable redness of a localized area usually over a bony prominence. Darkly pigmented skin may not have visible blanching; its color may differ from the surrounding area. The area may be painful, firm, soft, warmer or cooler as compared to adjacent tissue. Stage I may be difficult to detect in individuals with dark skin tones. May indicate “at risk” persons.

**STAGE II**
- Partial thickness loss of dermis presenting as a shallow open ulcer with a red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled or serosanguineous filled blister. Presents as a shiny or dry shallow ulcer without slough or bruising*. This category should not be used to describe skin tears, tape burns, incontinence associated dermatitis, maceration or excoriation. *Bruising indicates deep tissue injury.

**STAGE III**
- Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon or muscle are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling. The depth of a Stage III pressure ulcer varies by anatomical location. The bridge of the nose, ear, occiput and malleoli do not have (adipose) subcutaneous tissue and Stage III ulcers can be shallow. In contrast, areas of significant adiposity can develop extremely deep Stage III pressure ulcers. Bone/tendon is not visible or directly palpable.

**STAGE IV**
- Full thickness tissue loss with exposed bone, tendon or muscle. Slough or eschar may be present. Often includes undermining and tunneling. The depth of a Stage IV pressure ulcer varies by anatomical location. The bridge of the nose, ear, occiput and malleoli do not have (adipose) subcutaneous tissue and these ulcers can be shallow. Stage IV ulcers can extend into muscle and/or supporting structures (e.g., fascia, tendon or joint capsule) making osteomyelitis or osteitis likely to occur. Exposed bone/muscle is visible or directly palpable.

**SUSPECTED Deep Tissue Injury (DTI)**
- Purple or maroon localized area of discolored intact skin or blood-filled blister due to damage of underlying soft tissue from pressure and/or shear. The area may be preceded by tissue that is painful, firm, mushy, boggy, warmer or cooler as compared to adjacent tissue. Deep tissue injury may be difficult to detect in individuals with dark skin tones. Evolution may include a thin blister over a dark wound bed. The wound may further evolve and become covered by thin eschar. Evolution may be rapid exposing additional layers of tissue even with optimal treatment.

**UNSTAGEABLE**
- Full thickness tissue loss in which actual depth of the ulcer is completely obscured by slough (yellow, tan, gray, green or brown) and/or eschar (tan, brown or black) in the wound bed. Until enough slough and/or eschar are removed to expose the base of the wound, the true depth cannot be determined; but it will be either a Stage III or IV. Stable (dry, adherent, intact without erythema or fluctuance) eschar on the heels serves as “the body’s natural (biological) cover” and should not be removed.
Education

Educare® Seminars
Medline offers Educare seminars in cities across the United States. These in-depth programs provide wound and skin care education for all levels of clinical staff. Educare programs are approved for continuing education hours and are taught by board-certified wound care nurses. Medline also has a number of other educational programs available to meet the needs of your patients, facility and caregivers.

Educare® Hotline Managed by Wound Care Nurse Specialists
An important number to remember is 1-888-701-SKIN (7546) because it provides access to our Educare Hotline. It is managed by board-certified Wound Care Nurses and supported by a network of advanced wound care product specialists. The nurses are available to answer questions and concerns on product usage such as application and appropriateness of the dressing for the wound condition.

The Educare Hotline is staffed Monday through Friday from 8 a.m. to 5 p.m. Central Standard Time.

Product Support at www.medline.com/woundcare
Medline’s Web site is another way to get up-to-date product information. You will find the latest brochures as well as application videos online at www.medline.com/woundcare. The interactive product selector can also help you choose the best product based upon the wound conditions.

More Than 70 Wound and Skin Care Product Specialists
Receiving support from one of Medline’s 70+ wound care product specialists has never been easier. In addition to our 1,000+ person sales force, the wound care product specialists are devoted to supplying you with appropriate wound care products, services and educational support. This team is highly trained and available to deliver on-site, face-to-face in-servicing for your staff.

For more information, see www.medline.com/woundcare or contact your sales specialist.
Educational Packaging

Many nurses find themselves in situations on a daily basis where valuable time is wasted searching for the right dressing. Often the wrong dressing is used or the dressing is not used properly. By listening to you, we found a way to improve this process and ensure that nurses have the information they need. It is called EP… Educational Packaging. Products available in EP will now have an “EP” at the end of the item number. The package focuses on patient safety and correct product application. Each package serves as a 2-Minute Course on Wound Care™.

Many times the outer box is thrown away and the product is distributed to the end user by the inner package. For that reason Medline provides an educational show-and-tell packaging and/or booklet of pertinent information needed to provide bedside support to the nurse, the patient, and the family.

Education is not just for clinicians so they know and use the latest evidence base in their practice, but it is essential for their patients and their families. Making sure the patients and their family are taught the expected outcomes and the plan to achieve them is vital for successful wound treatment.
Online Education

Medline University®

Medline University offers continuing education programs and accredited continuing nursing education opportunities. We offer a wide array of educational opportunities on topics that are current and relevant to your staff. The courses are presented in an online format so you can take them at your convenience. All you need is a connection to the internet! The course content, test and CE certificate are online. Visit our Web site www.medlineuniversity.com for more information.

Professional healthcare education from Medline, now available on your iPhone® or iPad®.

Visit the Apple store (store.apple.com) to download the MU iPhone app and start accessing courses, newsfeeds, resources and much more – right from your iPhone or iPad!

Chart Your Progress

• Register
• Check course listings
• View your transcript

Build Your Knowledge

• Browse hundreds of articles and papers
• Watch expert presentations
• Read up-to-the-minute health news

And it’s all absolutely FREE!
WOUNDROUNDS®
A powerful system that transforms wound care management across the continuum of care.

WoundRounds integrates handheld technology with Web-based tools for documenting wounds, tracking outcomes and helping caregivers to maintain patients’ skin integrity.

ABOUT WOUNDROUNDS®
A point-of-care solution, WoundRounds combines the convenience of a handheld device with the efficiency of a Web-based application, where data can be stored and analyzed in a single system. With WoundRounds, you can enable your staff to improve patient care, save on costs by moving to digital data collection and storage, and quickly generate improvement reports.

HOW DOES IT WORK?

STEP 1: At the patient’s bedside, WoundRounds makes it easy to collect data on the patient’s wound.

• Take photos
• Follow step-by-step prompts through patient assessment
• Document treatment recommendations/utilization

STEP 2: Data collected with the handheld device is uploaded to secure servers. Once uploaded:

• Reports can be generated automatically
• No searching for paper charting
• No incomplete or missing documentation

Nurses enter data once, and it’s done!

Contact your Medline representative to request a demonstration of WoundRounds today!
NEED MORE CLINICAL INFORMATION?
CALL OUR EDUCARE HOTLINE AT 1-888-701-SKIN (7546)

SEE MEDLINE’S ADVANCED WOUND CARE PRODUCTS ONLINE

http://www.medline.com/wound-skin-care/