South Tyneside and Sunderland
Area Prescribing Committee

South Tyneside and Sunderland Wound Product Formulary

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This guideline has been prepared and approved for use within South Tyneside and Sunderland in consultation with South Tyneside and Sunderland Clinical Commissioning Groups and South Tyneside and Sunderland NHS Trust NHS Foundation Trust

Contents

1. Background

NHS South Tyneside Clinical Commissioning Group, NHS Sunderland Clinical Commissioning Group, and South Tyneside and Sunderland NHS Foundation Trust recognise that all staff have a role to play within wound management, and that wound care is a multidisciplinary concern.

Choosing the most appropriate dressing for a wound requires knowledge of the safety, clinical and cost-effectiveness of a range of dressings. Wound healing is multifactorial involving a combination of local and systemic factors which may include: the local viability of tissues, the individual's general health and wellbeing and additional environmental cofactors, such as patient concordance. These factors can all influence the rate, course and quality of healing and therefore influence choice of treatment.

Holistic wound assessment is vital, and should comprise a full medical history and assessment of factors likely to affect healing, to include: immobility, poor nutrition, heart failure, obesity, and personal circumstances. Accurate assessment and documentation will improve communication between professionals; improve continuity of care and enable monitoring of wound progression or deterioration. Documentation must include information related to wound measurement (linear, tracing or photography), depth of wound, wound tissue type, exudate colour and amount, odour, wound pain, signs of systemic or spreading infection, and condition of surrounding skin. Good clinical practice requires regular assessments and re-assessments for signs of healing. Infection Control measures must be adhered to when performing a wound dressing.

Wounds impose a substantial health economic burden within healthcare in the UK. There were 3.8million patients with a wound managed by the NHS in 2017/2018, at an annual cost of £8.3 billion (Guest et al, 2020). This is a substantial increase when compared with 5 years prior, when there were 2.2million patients with a wound managed by the NHS, at an annual cost of £5.3billion (Guest et al 2015). It is therefore vital that clinicians perform a thorough wound assessment, in order to commence the most appropriate wound management plan for the patient, to accelerate healing and to support cost improvement.

1.1 Wound Product Formulary

This wound product formulary was developed by a designated Wound Formulary Review Group, led by the Lead Nurse for Tissue Viability. Representatives from South Tyneside and Sunderland NHS Trust, Sunderland and South Tyneside Clinical Commissioning Groups and Procurement Services participated, sharing a common goal to standardise practice, promote evidence-based practice and to ensure continuity of care for patients within all localities.

Product evaluations were carried out by clinicians in both primary and secondary care settings, across a range of specialties, including Tissue Viability, Vascular, Podiatry and Community Nursing.

New products may be added to this formulary (and existing products removed if required) by submitting a new product request and written evaluation forms to the Formulary Review Group via the Tissue Viability Team. This request will then be considered by South Tyneside Medicines Management Committee and Sunderland Medicines Optimisation & Guidelines Group. The evidence base, affordability and commissioning implications will be assessed at these forums.
The formulary will be amended in light of new evidence or improved products and will be evaluated every 2 years.

Staff utilising this formulary must refer to the manufacturer's recommendations and guidelines when using any product listed within this document.

All clinicians will be expected to give a rationale for their decisions if deviating from this document.

1.2 Wound Care Product Ordering within Community Services

As part of the Regional Wound Care Product Ordering Project, South Tyneside and Sunderland CCGs previously reviewed the provisions of dressings and other wound care products to primary care and decided to remove these items from prescription. Since November 2018, community clinicians have ordered wound care products via an online ordering system. This applies to all areas, to include: GP Practices, Community Nursing, Nursing Homes and all community specialist clinics.
The aim and objectives of this project are to achieve:

- 100% formulary compliance
- detailed monitoring of spend and products used
- reduction in estimated 35% waste when the prescribed product is unused
- expected net savings in the region of 10-15% as this system is not VAT exempt like prescriptions
- improved healing rates/ patient outcomes due to the correct dressing being available immediately
- reduced nursing time ordering/ writing prescriptions
- reduced GP workload

1.3 Best Practice Guidance

The aim of this formulary is to promote safe, evidence-based, effective and economical practice.

(1) Maximising effectiveness

Practitioners should have the knowledge and skills to manage wounds. Product selection should be based upon a detailed wound assessment and

must be appropriate to the stage of wound healing. Patients with wounds must be reviewed regularly as wound presentation may indicate that a change of dressing is required.

(2) Minimise risk

All registered nurses must only prescribe, advise, or provide medicines or treatment if equipped with sufficient knowledge and are satisfied that the medicines or treatment serve that person's health needs (Nursing and Midwifery Council, 2018)

Consideration must be given to poly-pharmacy, known allergies or previously identified sensitivities.

(3) Minimise costs

The achievement of cost-effective prescribing and helping to obtain value for money from NHS resources is in the interests of all patients. This may free up resources to improve patient care and treat more patients. Wound healing is a dynamic process and different stages of healing may require different wound management products; therefore excessive supplying of products must be avoided to reduce unnecessary waste. It is advised that generally, no more than one week supply of dressings should be issued at any one time, and the wound then reassessed prior to issuing further dressings.

It is appropriate to select the most cost-effective product for a patient, therefore where a less expensive product is considered appropriate to manage a wound, this product should be used.

(4) Respect patient choice

A choice of products have been given within each section to accommodate both patient and practitioner preferences. If a patient insists on having a wound dressing changed daily, but this is not clinically indicated e.g. exudate levels are low, then consideration should be given to the type of dressing which would be most cost-effective in this situation**.**

Prescribing for Children

Children, and particularly neonates, differ from adults in their response to drugs. Where possible, medicines for children should be prescribed within the terms of the marketing authorisation (product licence). However, many children may require medicines, or in this case wound management products, not specifically licensed for paediatric use. Although medicines cannot be promoted outside the limits of the licence, the Human Medicines Regulations 2012 does not prohibit the use of unlicensed medicines. It is recognised that the informed use of unlicensed medicines or of licensed medicines for unlicensed applications ('off-label' use) is often necessary in paediatric practice (British National Formulary, 2020).

Many wound management products are not licensed for use in children, but are often used in clinical practice.Topical antimicrobial dressings should be considered for neonates, infants, children and young people when clinically indicated; for example, if there is spreading cellulitis. Iodine dressings should not be used for neonates (NICE, 2016).

2. WOUND PRODUCT FORMULARY

2.1 SKIN CARE

Emollients can be used as soap substitutes for skin cleansing, or as skin moisturisers. They are lipid-based and soothe, smooth and hydrate the stratum corneum, reducing dryness and discomfort or pain. Impaired skin barrier function can be caused by a number of factors, to include: advanced age, critical illness, long-term conditions, infection, inflammation and dry or itchy skin conditions (Wounds UK, 2018).

Emollients help to maintain skin barrier function - they re-grease the skin whilst cleansing, and help to maintain the skin's acidic PH (which creates an important antiseptic environment). In comparison, detergents are alkaline-based and de-grease the skin's surface.

Do not use perfumed soap or talc and avoid Aqueous cream, Sudocrem, Drapolene, Metanium, Unguentum Merk, Deegan ointment, E45, Oilatum, Zinc and Castor Oil.

Paraffin-based products should be avoided if near high flow oxygen and heat source e.g. patients sitting at home in front of the fire/smokers (MHRA, 2020).

HYDROMOL® OINTMENT (Alliance Pharmaceuticals)

Hydromol ointment should be melted into warm water when used as a skin cleanser.

- Can be used as a soap substitute for general skin cleansing, or as a skin moisturiser
- Can also be used to cleanse skin if mild to severe moisture-associated skin damage (MASD) is present
- Hydromol contains a lipid-lamellar mimicking agent, providing 24-hour protection against trans-epidermal water loss
- Raises the skin's PH to prevent against infection
- Soothes and hydrates skin

HYDROMOL OINTMENT	
Sizes Available	
Acute	Community
125g	125g
500g	500g

MEDI DERMA-PRO FOAM AND SPRAY INCONTINENCE CLEANSER (Medicareplus)

- For the management of severe moisture-associated skin damage (MASD) due to incontinence, for use after every episode
- Can be used as an alternative to Hydromol ointment

MEDI DERMA-PRO FOAM AND SPRAY INCONTINENCE CLEANSER		
Sizes Available		
NHSSC Codes	Acute	Community
ELY608	250ml	250ml

BARRIER PRODUCTS

Barrier products cannot be ordered through ONPOS in the community setting; therefore an FP10 prescription is required.

Barrier products are recommended to prevent and treat Moisture-Associated Skin Damage (NICE, 2014). **Only one barrier product should be used at a time.**

Indications:
- Barrier against irritation of bodily fluids
- Prevention of damage from incontinence
- Protection barrier against aggressive adhesive products
- Skin protection around stoma sites
- Peri wound protection from exudates

Contra-indications:
- Allow to dry completely before applying pads or clothing
- Avoid application of too many layers
- Can affect electrode readings
- Should not be used with other barrier creams or lotions
- Paraffin-based products should be avoided if near high flow oxygen and heat source e.g. patients sitting at home in front of the fire/smokers (MHRA, 2020)

MILD SKIN DAMAGE - 1st line

MEDI DERMA S® TOTAL BARRIER CREAM (Medicareplus)

To be applied every third wash or twice daily
- Provides gentle barrier protection on intact skin or mild skin damage
- Moisturises and protects damaged and intact skin by forming a protective, waterproof barrier, preventing irritation from bodily fluids, adhesive products and friction

MEDI DERMA S TOTAL BARRIER CREAM		
Sizes Available		
NHSSC Code	Acute	Community
ELY457	2g sachet	28g tube

MODERATE SKIN DAMAGE - 2nd line

MEDI DERMA S® BARRIER FILM (Medicareplus)

To be applied once daily

- Protective transparent, non-sting barrier film.
- Protects skin from exudate and adhesives.
- Can be used on broken or unbroken skin.

MEDI DERMA S BARRIER FILM		
Sizes Available		
NHSSC Codes	Acute	Community
ELY532	1ml applicator	1ml applicator
ELY533	3ml applicator	
ELY561	50ml aerosol	50ml aerosol

SEVERE SKIN DAMAGE - 3rd line

MEDI DERMA-PRO OINTMENT (Medicareplus)

To be applied after each skin cleanse

- Can be used on broken or unbroken skin
- Suitable for paediatrics and elderly patients
- Non sting formulation, pain free application
- Alcohol, Fragrance, Latex, Parabens and Phthalates Free

MEDI DERMA-PRO OINTMENT		
Sizes Available		
NHSSC Codes	Acute	Community
ELY607	Skin Protectant Ointment 115g	Skin Protectant Ointment 115g

SEVERE SKIN DAMAGE – 4th line

CAVILON ADVANCED SKIN PROTECTANT ® (3M Healthcare)

- ***Only to be used where 1st, 2nd and 3rd line products are inadequate***
- ***Tissue Viability Recommendation only***
- Supports healing and reduces pain
- Attaches to wet, weepy damaged skin
- Only requires 2 x weekly applications

CAVILON ADVANCED SKIN PROTECTANT		
Sizes Available		
NHSSC Code	Acute	Community
ELY801	2.7ml sterile applicator	2.7ml sterile applicator (prescription)

KERRAPRO PRESSURE REDUCING PADS® (Crawford Healthcare)

Silicone pads that help protect the skin of at-risk patients as part of a pressure ulcer prevention program.

- Can be reused on the same patient (simply wash with soap and water), then dry thoroughly before re-application
- Only use on healthy, intact or recently healed skin
- Not a wound dressing and should never be placed on ulcerated or broken skin
- Not to be used where there is a known sensitivity to silicone

KERRAPRO	
NHSSC Codes	Sizes Available
FES9912	Sheet 10x10x0.3cm
FES9913	Sheet 10x10x1.2cm
FES9914	Strip 30x5x0.3cm
FES9911	Heel one size

2.2 DRESSING PACKS

Dressing packs are required where aseptic non touch technique is essential. Dressing packs will not be required if a clean technique requires only Personal Protective Equipment (PPE) e.g. gloves and apron (non-sterile). Dressing Packs containing cotton wool balls must be avoided due to the risk of fibre shedding and as a result, delayed healing.

Indications for Aseptic Non Touch Technique (ANTT)

- Wounds healing by primary intention (before surface skin has healed i.e. if the dressing is disturbed within 48 hours of surgery).
- Central venous catheterisation and on-going care.
- Urinary and supra-pubic catheterisation.
- When carrying out minor surgical procedures within clinical environments.

- When a clean technique is insufficient in relation to the patient's/service user risk assessment, e.g. sterile body areas are entered, there is tracking to deeper areas or the patient is immunocompromised.

When carrying out dressing procedures in a patient's home, the healthcare worker does not have specific equipment as in a hospital setting, for example, a dressing trolley; therefore adaptations and creativity are often required to ensure the environment is conducive to the procedure being performed and the equipment remains sterile or clean. The use of a clean surface should be used to arrange the dressing equipment.

ORDERING

SOFT DRAPE ® (Richardson Healthcare)

Acute and Community

SOFT DRAPE	
NHSSC Codes	Sizes available
EJA045 EJA046 EJA047	Small Medium Large

Dressing pack contains:
- 1 x pair Vitrex accelerator free gloves
- 42" plastic apron
- 10x10cm non-woven gauze swabs
- 2 x sterile fields
- 1 x disposable bags
- 1 x dressing towel
- 1 x measuring device
- 1 x tray

Forceps can be ordered separately if required:

FORCEPS
- Disposable Forceps
- Sterile – single wrapped
- 13cm

FORCEPS	
NHSSC Code	Acute
FCC72	Pack of 100

2.3 WOUND CLEANSING

Routine wound cleansing of post-surgical wounds is no longer considered necessary or desirable practice. It can expose a patient to potentially harmful bacteria by altering the normal bacterial flora, which in turn can disrupt the healing process and cause trauma to the tissue.

Where there are indications for cleansing, irrigation is the preferred method of choice. This causes less trauma to the wound than swabbing and keeps the wound free from particles or contaminants.

Sodium chloride 0.9% is preferred where a sterile solution is required.

For chronic wounds (such as leg ulcers), warm tap water can be used (Fernandez and Griffiths, 2012).

Surfactant solutions (such as Octenilin) reduce surface tension and moisten the skin, loosening biofilm and devitalised tissue. Surfactant solutions should be considered for infected or heavily colonised wounds.

SODIUM CHLORIDE 0.9% SOLUTION

Acute only:

IRRIPOD (CD Medical Ltd)

- Irrigation fluid sterile sodium chloride 0.9%

IRRIPOD	
NHSSC Code	Acute
MRB742	20ml (pack of 25)

Community only:

SAL-E POD (Ennogen Pharma Limited)

- Irrigation fluid sterile sodium chloride 0.9%

SAL-E POD
Community
20ml (pack of 25)

SURFACTANT

OCTENILIN WOUND IRRIGATION SOLUTION ® (Schulke)

- Wound irrigation solution containing a combination of octenidine and ethylhexylglycerin
- Ethylhexylglycerine reduces surface tension and moistens the skin, loosening biofilm and devitalised tissue
- Octenidine prevents bacteria and fungi growing in the solution and the wound dressing
- Can be used as irrigation to remove wound crusts consisting of necrotic tissue, biofilm and fibrinous films
- For colonised/ infected wounds soak gauze from dressing pack in Octenilin solution and apply to wound bed for 5 minutes

OCTENILIN		
NHSSC Code	Acute	Community
MRB443	350ml	350ml

DEBRIDEMENT

UCS ® (Medi)

- A sterile, pre-moistened, single use cloth for wound debridement and cleansing of the surrounding area
- Contains a mild cleansing solution that moisturizes and softens without damaging healthy cells
- It acts immediately, does not inhibit granulation tissue formation and is compatible with subsequent use of any type of dressing
- For use on chronic and acute wounds, abrasions, all types of ulcers, pressure ulcers and first or second degree burns

UCS	
NHSSC Code	Sizes Available
ELZ746	Pack of 10 wipes 19X 19cm

2.4 LOW ADHERENT DRESSINGS

Indications:
- Wound contact layer for open wounds

Contra-indications:
- None listed

ATRAUMAN® (Paul Hartmann)

- Non adherent polyester mesh wound contact layer. 1mm pore size and impregnated with neutral triglycerides prevent granulation tissue penetrating and provides skin care
- Effective for up to 7 days
- Petrolatum-free
- Store flat, to ensure that ointment does not relocate to one side of the dressing

ATRAUMAN	
NHSSC Code	Sizes Available
EKA024	5x5cm
EKA032	7.5x10cm
EKA036	10x20cm
EKA016	20x30cm

N-A ULTRA® (3M + KCl)

- ***Community setting only***

- Constructed from knitted viscose rayon
- Designed to act as an interface between ulcerating or granulating wounds and conventional absorptive dressings to prevent adhesion

N-A ULTRA
Sizes Available
9.5x9.5cm
19x9.5cm

2.5 HYDROFIBRES

Hydrofibres are chemically more akin to hydrocolloids but are usually included within the alginate group because of their similarity in appearance and performance. They are up to 50% more absorbent than alginates and maintain their structure when wet. Hydrofibres are also thought to have a bacteriostatic action by trapping and holding bacteria within the dressing matrix. They also have haemostatic properties and must be used as a primary dressing only.

Indications

- Indicated for moderate to heavily exuding chronic and acute wounds, and to control minor bleeding in superficial wounds

Contra-indications

- Not to be used on dry wounds or to control heavy bleeding
- Should not be used on individuals who are sensitive to or who have had an allergic reaction to the dressing or its component

KERRACEL ® (Crawford Healthcare)

- Gelling fibre dressing made from carboxymethylcellulose (CMC)
- Not to be used on patients with known sensitivity to CMC

KERRACEL	
Code	Sizes Available
ELY623	5x5cm
ELY620	10x10cm
ELY621	15x15cm
ELY622	2.5x45cm rope

2.6 HYDROGELS

Hydrogels are available either in an amorphous form or as a sheet dressing. Characteristically, they have high water content and have hydrophilic sites, which enable them to absorb excess exudate while producing a moist wound environment. They promote debridement by rehydration and autolysis.

Indications:

- Hydrogels may be applied to most wounds, including pressure ulcers and cavity wounds.
- They are suitable for **dry or lightly** exuding wounds, necrotic tissue and slough.
- Hydrogels are able to rehydrate the wound and facilitate autolysis.
- They provide a soothing and cooling effect on application and may assist in the reduction of pain.

Contra-indications:

- Hydrogels are ineffective in wounds that are producing large volumes of exudate as the hydrogel is washed away from the wound surface onto the secondary dressing.
- Hydrogels should not be used with alginates as they will be absorbed.
- They should not be used in patients who are sensitive to propylene glycol.
- Hydrogels interact with povidone-iodine therefore they should not be mixed.
- If maggot debridement therapy is indicated, the wound must be thoroughly cleansed as preservatives such as propylene glycol (a common constituent of hydrogels) are toxic to maggots.

KERRALITE COOL/ KERRALITE COOL BORDER ® (Crawford Healthcare)

- Pro-ionic hydrogel contact layer and fluid repellent polyurethane film outer layer
- Available in non-adhesive and adhesive options

KERRALITE COOL	
NHSSC Code	Sizes Available
EME081	6x6cm
EME082	12x8.5cm
EME083	18X12.5cm

KERRALITE COOL BORDER	
NHSSC Code	Sizes Available
EME084	8x8cm
EME085	11x11cm
EME086	15x15cm

2.7 HYDROCOLLOIDS

Hydrocolloids are primarily composed of carboxymethyl cellulose (CMC). They interact with the wound exudate to produce a gel. Hydrocolloids are

impermeable to oxygen and create a hypoxic environment, which stimulates angiogenesis. They provide a moist wound environment, promoting autolytic debridement.

Indications

- Hydrocolloid sheets are occlusive and are suitable for clean, granulating, sloughy or necrotic wounds with low exudate
- In sloughy or necrotic wounds the dressing prevents loss of water vapour and hydrates dead tissue encouraging autolysis (natural debridement)
- Dressing may be left in place for 7 days depending on the amount of exudate produced
- Dressing should be changed when gel becomes visible through the dressing as a yellow bubble

Contra-indications

- Hydrocolloids should not be used if clinical anaerobic infection is present
- If overgranulation occurs with hydrocolloid treatment, changing to a more permeable dressing may encourage epithelialisation

DUODERM® EXTRA THIN™ (Convatec)

- Thin polyurethane film providing a waterproof barrier over the dressing.
- Can be removed without damaging newly formed tissue

DUODERM EXTRA THIN	
NHSSC Codes	Sizes Available
ELM311	7.5x7.5cm
ELM050	10x10cm
ELM051	15x15cm

- Contains gelatin, therefore may not be suitable for certain ethnic groups or for vegans/vegetarians (should be discussed with the patient and/or patients' relatives/carers prior to use)

2.8 FILM DRESSING

Vapour-permeable films and membranes allow the passage of water vapour and oxygen but are impermeable to water and micro-organisms. They are highly conformable, provide protection, and a moist healing environment; transparent film dressings permit constant observation of the wound.

Indications:

- Vapour-permeable films and membranes are suitable for lightly exuding partial-thickness wounds. Most commonly, they are used as a secondary dressing over alginates or hydrogels; film dressings can also be used to protect the fragile skin of patients at risk of developing minor skin damage caused by friction or pressure

Contra-indications:

- Vapour-permeable films and membranes are unsuitable for infected, large heavily exuding wounds, and chronic leg ulcers.
- Not to be used in place of sutures or other wound closures.

TEGADERM FILM ® (3M + KCl)

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- Transparent vapour-permeable film dressing with 'frame delivery' system.
- Hypoallergenic
- Wear time up to 7 days

TEGADERM FILM	
NHSSC Codes	Sizes Available
ELW211	6x7cm
ELW213	12x12cm
ELW217	15x20cm

2.9 FABRIC AND PAD

COSMOPOR E® (Paul Hartmann)

- Latex free, adhesive island dressing with non-adherent absorbent pad
- Sterile dressing of minor injuries i.e. in first aid
- Should not be used as primary post-operative dressing

COSMOPOR E	
NHSSC Codes	Sizes Available
EIJ038	5x7.2cm
EIJ039	8x10cm
EIJ040	8x15cm
EIJ041	10x20cm

2.10 POST-OPERATIVE DRESSINGS

Post-operative dressings act as an effective barrier to bacterial contamination. They function as a waterproof barrier, allow gaseous exchange, allow monitoring of the peri wound skin and have low adherence to the wound for easy, atraumatic removal. They should be left undisturbed for a minimum of 48hrs post operatively and ideally for a week. An aseptic non-touch technique should be used to change or remove dressings. Post-operative wounds should not be cleaned routinely. Should the need arise sterile saline should be used for wound cleansing for up to 48hrs after surgery. Patients may shower 48 hours after surgery. Tap water can be used to cleanse the wound after 48 hours if required.

OPSITE POST-OP ® (Smith and Nephew)

- Vapour-permeable adhesive film dressing with absorbent pad.
- Waterproof, impermeable to microorganisms, hypoallergenic.
- Wear time up to 7 days.

OPSITE POST-OP	
NHSSC Codes	Acute only Sizes Available
ELW052	5x6.5cm
ELW051	8.5x9.5cm
ELW050	8.5x15.5cm
ELW090	10x12cm
ELW091	10x20cm
ELW092	10x25cm
ELW045	10x30cm
ELW049	10x35cm

AQUACEL SURGICAL ® (Convatec)

- ***2nd line only (orthopaedics)***
- Conformable cover dressing formed of a soft, sterile, non-woven pad of sodium carboxymethylcellulose with a waterproof polyurethane film backing and hydrocolloid adhesive
- For the postoperative management of surgical incisions
- Should not be used on individuals who are sensitive to or who have had an allergic reaction to the dressing or its components

AQUACEL SURGICAL	
NHSSC Codes	Sizes Available
ELY323	9x10cm
ELY324	9x15cm
ELY325	9x25cm
ELY326	9x35cm

2.11 FOAM DRESSINGS

Foam dressings are available in polyurethane flat sheets which can be easily cut or shaped. They are light and comfortable for the patient and do not shed particles or fibres, their insulating properties help to maintain an optimum temperature at the wound site. Capable of absorbing large volumes of wound exudate. Some foam dressings have an adhesive border, while others need to be secured with tape/ film dressings at the edge of the foam dressing. Please note: foam dressings should not be completely covered with film dressings as this affects their permeability. The time at which foam dressings should be changed is determined by the amount of exudate produced and can be left in place for up to 7 days.

Indications:

- Foam dressings are used on a variety of wounds including leg ulcers and pressure ulcers. They are suitable for light, moderate or heavily exuding wounds depending on the product.

Contra-indications:

- Not suitable for dry epithelialising wounds or dry eschar.
- Sheet foams are not suitable as packs for cavity wounds.

- Should not be used on individuals who are sensitive to or who have had an allergic reaction to the dressing or its component

SILICONE FOAM

ALLEVYN GENTLE BORDER® (Smith and Nephew)

- Conformable bordered silicone foam dressing
- Suitable for use on fragile skin
- Moderate to heavily exuding wounds
- Minimises trauma to the wound and pain to the patient during dressing changes
- Showerproof
- Moderately exuding wounds
- Range of sizes and shapes available for awkward areas

ALLEVYN GENTLE BORDER	
NHSSC Codes	Sizes Available
ELA359	7.5x7.5cm
ELA362	10x10cm
ELA361	12.5x12.5cm
ELA499	10x20cm
ELA1017	10x25cm
ELA1018	10x30cm
ELA565	15x15cm
ELA358	17.5x17.5cm
ELA392	Heel 23x23.2cm
ELA498	Small sacrum 16.8x17.1cm
ELA605	Large sacrum 21.6x23cm
ELA566	Multisite 17.1x17.9cm

ALLEYVN GENTLE® (WITHOUT BORDER) (Smith and Nephew)

- Conformable non-bordered silicone foam dressing
- Suitable for use on fragile skin
- Moderate to heavily exuding wounds
- Minimises trauma to the wound and pain to the patient during dressing changes
- Moderately exuding wounds

ALLEVYN GENTLE	
NHSSC Codes	Sizes Available
ELA364	5cm x 5cm
ELA360	10cm x10cm
ELA363	15x15cm

ALLEVYN LIFE (WITH BORDER) ® (Smith and Nephew)

Use as a 'step up' from Allevyn Gentle Border

- Conformable silicone adhesive foam (with border)
- Silicone layer reduces trauma and pain on removal
- Suitable for use on fragile skin
- Foam layer absorbs heavy exudate vertically and transfers it away from the wound and peri-wound
- Exumask change indicator, which allows the patient/clinician to see when the dressing needs changed
- Showerproof
- Range of sizes and shapes available for awkward areas
- For moderate to heavy exuding wounds – use as a 'step up' from Allevyn Gentle border

ALLEVYN LIFE	
NHSSC Codes	Sizes Available
ELA607	10.3X10.3cm
ELA608	12.9x12.9cm
ELA609	15.4x15.4cm
ELA610	21x21cm
ELA645	17.2x17.5cm Small sacrum
ELA646	21.6x23cm Large sacrum

BIATAIN SILICONE (WITH BORDER) ® (Coloplast)

- Designed to 'bubble' to fill the gap between the dressing and the wound bed, therefore filler dressings not required for cavities up to 20mm depth
- Should not be used for cavities with depth of more than 20mm
- Soft, conformable, absorbent polyurethane foam pad with a vapour-permeable film backing and a gentle silicone adhesive border
- Moderately exuding wounds
- Do not use on patients with a known sensitivity to the dressing or its components

BIATAIN SILICONE	
NHSSC Codes	Sizes Available
ELA425	7.5x7.5cm
ELA451	10x10cm
ELA426	12.5x12.5cm
ELA427	15x15cm
ELA428	17.5x17.5cm

2.12 SUPER- ABSORBENTS

A range of dressings that rapidly absorb and retain large volumes of exudate.

Indications
- Management of heavily exuding wounds, leaking legs and lymphorrhoea

Contra-indications
- Lightly exuding wounds
- Known sensitivity to any of the components of the dressing
- Can get very heavy when at full absorption

KERRAMAX CARE™ SUPERABSORBENT (3M and KCI)

- Wicking action absorbs potentially unhealthy exudate and locks it inside the dressing
- Suitable for use under all forms of compression
- Soft and conformable

KERRAMAX CARE SUPERABSORBENT		
NHSSC Codes	Sizes Available	
	Acute	Community
EME045	10x10cm	10x10cm
EME023	10x22cm	10x22cm
EME024	20x22cm	20x22cm
EME025	20x30cm	20x30cm
EME121		20x50cm

2.13 PADDING

Padding can be used to reshape the legs with a thin ankle and large upper calf or alternatively a large ankle and thin upper calf and thigh to ensure a cylindrical shape to achieve graduated compression. Additional padding can be used on vulnerable areas e.g. tibial crest by applying an additional layer or pleating the wool layer. Unless otherwise indicated, start bandaging on the foot, which, having been adjusted forms an angle of 90◦ to the leg.

PROFORE ® #1 (Smith and Nephew)

- Natural or synthetic cotton wool padding.
- This layer is used to shape the leg, absorbs exudate.
- Under compression it protects bony high points of the ankle and shin from excessive pressure.
- Should be used with PROFORE or URGOKTWO Compression systems if extra padding is required.
- Latex free

PROFORE #1	
NHSSC Codes	Sizes Available
EBA053	10cm x3.5m

CELLONA UNDERCAST PADDING ® (L&R)

- ***For use in Plaster room only***
- Synthetic undercast padding

CELLONA PADDING	
NHSSC Codes	Sizes Available
EPE026	5cm x 2.7m
EPA036	7.5cm x 2.7m
EPA035	10cm x 2.7m
EPE027	15cm x 2.7m

2.14 ADHESIVE TAPES

Indications

- Used for securing primary or non-adhesive dressings in place.

Contra-indications

- Should not be applied to patients with known sensitivity to acrylic adhesives

CLINIPORE ® (CliniSupplies)

- Soft porous non-woven surgical tape, made from hypoallergenic material.
- It is permeable to water and air vapour making it ideal for sensitive skin

CLINIPORE	
NHSSC Codes	Sizes Available
EHU019	1.25cmx5m
EHU027	2.5cm x5m
EHU028	5cmx5m
EHU020	2.5cmx10m

MEFIX® (Mölnlycke)

- Mefix consists of an aperture, non-woven polyester fabric coated with a layer of an acrylic adhesive and protected on the roll by a release paper backing.
- Care should be taken when applying mefix that it is not applied under tension, to prevent shearing forces causing damage to the skin.

MEFIX	
NHSSC Codes	Sizes Available
EHR000	2.5cm x5m
EHR001	5cmx5m
EHR002	10cmx5m
EHR003	15cmx5m

HYPAFIX® (BSN Medical)

- ***For podiatry and paediatrics only (for fixing NG tubes)***
- Permeable, apertured, non-woven, synthetic adhesive tape.

HYPAFIX	
NHSSC Codes	Sizes Available
EHR033	5cmx5m
EHR034	10cmx5m
EHR030	2.5cm x10m
EHR111	5cmx10m
EHR113	10cmx10m
EHR031	15cmx10m
EHR117	20cmx10m
EHR032	30cmx10m

2.15 ADHESIVE REMOVERS

Adhesive removers enable the easy removal of dressings, reducing the risk of skin stripping or pain on removal.

MEDI LIFTEEZ (Medicareplus)

- Silicone based – **Alcohol Free**
- Non-Sting formulation, pain free application
- Dries in seconds
- Aerosol can be sprayed and used at any angle

MEDI LIFTEEZ	
NHSSC Codes	Sizes Available
EXC041	Aerosol 50ml
EXC042	Pack of 30 wipes

2.16 <u>SUPPORT BANDAGE</u>

Type 2 light support bandage, Support bandages can be used for sprains and strains, prevention of oedema, and for dressing retention.

K-LLITE ® (Urgo Medical)

- Lightweight knitted bandage consisting of viscose, nylon and elastomeric yarn
- Latex free
- Maintains position with no slippage

K-LITE	
NHSSC Codes	Sizes Available
ECA084	5cmx4.5m
ECA086	7cmx4.5m
ECA100	10cmx4.5m
ECA109	15cmx4.5m

2.17 TUBULAR BANDAGE

COMFIFAST® (Synergy

Healthcare)

- Tubular bandage for the retention of dressings

COMFIFAST		
NHSSC Codes	Sizes Available	
	Acute	Community
EGP063	Red 3.5cmx1m	Red 3.5cmx1m
EGP065	Green 5cmx1m	Green 5cmx1m
EGP066	Green 5cmx3m	Green 5cmx3m
EGP006	Green 5cmx5m	Green 5cmx5m
EGP067	Blue 7.5cmx1m	Blue 7.5cmx1m
EGP068	Blue 7.5cmx3m	Blue 7.5cmx3m
EGP007	Blue 7.5cmx5m	Blue 7.5cmx5m
EGP070	Yellow 10.75cmx1m	Yellow 10.75cmx1m
EGP071	Yellow 10x75cmx3m	Yellow 10x75cmx3m
EGP072	Yellow 10x75cmx5m	Yellow 10x75cmx5m
EGP062	Beige 17.5cmx1m	Beige 17.5cmx1m
EGP009	Beige 17.5cmx10m	

COMFIGAUZ® (Synergy Healthcare)

- ***Not available in community***
- Tubular bandages used for dressing retention.

COMFIGAUZ	
NHSSC Codes	Sizes Available
EGJ045	00 Toes
EGJ041	01 Fingers and toes
EGJ043	56 Adult limbs
EGJ044	78 Large Adult limbs

2.18 PASTE BANDAGES

Indications:

- Zinc paste bandage can be used under compression bandaging for the treatment of venous eczema or for the management of chronic eczema/ dermatitis where occlusion is indicated

Contra-indications:

- Paste bandages are associated with hypersensitivity reactions and should be used with caution they are not to be used if patient has any allergy to any of these ingredients

VISCOPASTE ®PB7 (Smith & Nephew)

- Cotton fabric, plain weave, impregnated with paste containing zinc oxide
- Beginning at the base of the toes, bandage should be loosely wrapped around the foot and heel and ankle, with every turn, the bandage should be folded back on itself in a pleat, at the front of the leg. This should be repeated up the leg until just below the knee. Once applied, the leg should be covered with a bandage or dressing to prevent soiling to clothing

VISCOPASTE	
NHSSC Codes	Sizes Available
EFA011	7.5cmx6m

2.19 COMPRESSION BANDAGES

Compression therapy does not 'cure' the underlying disease, it provides palliative management of symptoms.
The bulk of some compression bandages can lead to non-adherence. Two layer systems are associated with greater comfort and tolerability.
Venus IV, a large, multicentre randomised control trial (RCT) found no difference in venous ulcer healing between two layer hosiery kits and four layer bandaging (Ashby et al, 2014).
Compression bandaging must only be applied by staff assessed as competent with application. Patients should have a full leg ulcer assessment including ABPI prior to application.
Once oedema and exudate levels allow, patients should be managed in the equivalent level of compression hosiery or wrap, which will result in reduced nursing time, physical demands of bandaging and costs, as well as increasing patient independence, quality of life and concordance.
For guidance around the appropriate use of compression, refer to the Compression Therapy Selection Chart: Compression_selection_guide.pdf (stsft.nhs.uk)

ELASTIC SYSTEMS

PROFORE®/PROFORE LITE® MULTI-LAYER ELASTIC COMPRESSION BANDAGE SYSTEM (Smith & Nephew)

- Has been specifically developed for the management of venous leg ulcers and associated conditions.
- Patient must have a full leg ulcer assessment including ABPI prior to application
- It is important to measure the patient's ankle to select the correct kit.
- Kits can be used to apply full or modified

PROFORE KITS	
NHSSC Codes	Sizes Available
EVN039	Profore Lite
ECA055	Profore Lite (latex free)
EVN004	Profore 18-25cm
ECA037	Profore 18-25 (latex free)
EVN015	Profore 25-30cm
EVN023	Profore 30cm +

compression depending on the kit chosen and the patient ankle size
- Refer to manufacturers guidance and Compression Therapy Selection Chart for appropriate use
- Should only be used on patients with a diagnosis of venous hypertension associated with active ulceration Specialist advice should be sought if unsure
- Latex free formulation also available

INDIVIDUAL COMPONENTS FOR USE WITHIN VASCULAR DEPARTMENT ONLY

PROFORE COMPONENTS		
NHSSC Codes	COMPONENT	Sizes Available
EBA053	#1	10cm x 3.5m
ECA029	#2	10cm x 4.5m
EBA048	#3	10cm x 8.7m
ECA133	#3 latex free	10cm x 8.7m
ECD007	#4	10cm x 5.25m
ECA134	#4 latex free	10cm x 5.25m

URGO K-TWO®/URGO K-TWO REDUCED ® (Urgo Medical)

Layer #1 – a composite layer formed of wadding & a short stretch compression fabric. This is designed to be in direct contact with the skin & creates a moderate pressure at rest, which significantly increases when walking. This layer evenly distributes pressure across the leg surface ensuring that there are no areas of excessive or inadequate pressure. NB This layer cannot be used for padding or reshaping as it provides compression.

LAYER #2 – cohesive elastic bandage which provides the additional pressure to achieve the required level of pressure for the treatment of venous ulcers & chronic venous oedema.

- Calibrated two layer compression bandage system which composes of two active bandages designed to be used together
- Patient must have a full leg ulcer assessment including ABPI prior to application
- Kits can be used to apply full or modified compression depending on the kit chosen and the patient ankle size
- Refer to manufacturers guidance and Trust Leg Ulcer Guidelines for appropriate use
- Latex free

URGO K-TWO Latex Free Kits	
NHSSC Codes	Sizes Available
ECA236	Ankle 18-25cm (full)
ECA234	Ankle 18-25cm (reduced)
ECA237	Ankle 25-32cm (full)
ECA235	Ankle 25-32cm (reduced)

COBAN® 2 LAYER COMPRESSION (3M and KCI)

- ***For lymphoedema management only (community – not for hospital use)***

- Consists of an inner comfort layer and an outer compression layer
- There is only one size that is suitable for all patients irrespective of ankle size.
- Patient must have a full leg ulcer assessment including ABPI prior to application
- Latex-free
- Kits can be used to apply full or modified compression depending on the kit chosen
- Refer to manufacturers guidance and Trust Leg Ulcer Guidelines for appropriate use
- Smaller bandages can be used to apply a boot to the forefoot to control foot and toe oedema.

COBAN 2 KITS	
Codes	Sizes Available –COMMUNITY ONLY
ECA203 ECA136	Coban 2 Lite Coban 2
COBAN 2 Components	
Codes	Sizes Available
ECD209 ECD210 ECD211 ECD501 ECD503 ECD504	Comfort Layer 5cmx1.2m Comfort Layer 10cmx3.5m Comfort Layer 15x3.5m Compression layer 5cmx2.7m Compression layer 10cmx4.5m Compression layer 15cmx4.5cm

ANDOFLEX TLC ZINC LITE ® 2 LAYER KIT (H&R Healthcare)

- A two-layer, latex-free compression system that comprises layer 1, an absorbent zinc-impregnated
- Comfort roll to ease pain and skin irritation, and layer 2, a cohesive short-stretch bandage
- The kit includes nylon stocking for ease of movement under clothes and on bed sheets
- For the treatment and management of venous eczema or for the management of chronic eczema/ dermatitis/malodorous venous leg ulcers

ANDOFLEX TLC ZINC LITE 2 Layer Kit	
NHSSC Codes	Sizes Available
EFA005	Andoflex TLC ZINC LITE Kit

COHESIVE SHORT STRETCH BANDAGES

ACTICO® (L&R)

- Cohesive inelastic bandages
- Applied at full stretch over padding
- This range enables below knee, full leg and arm bandaging
- This product contains latex

ACTICO	
NHSSC Codes	Sizes Available
EBA030	4cmx6m
EBA031	6cmx6m
EBA032	8cmx6m
EBA016	10cmx6m
EBA033	12cmx6m

COMPRILAN ® (BSN Medical)

- ***For lymphoedema management only***
- Not to be used for patients with ulceration
- 100% cotton short stretch bandage

COMPRILAN	
NHSSC Codes	Sizes Available
EBA046	6cmx5m
EBA047	8cmx5m
EBA048	10cmx5m
EBA049	12cmx5m

2.20 COMPRESSION HOSIERY AND GARMENTS

Indications

- Used to treat conditions associated with chronic venous insufficiency, such as lower limb oedema, venous leg ulceration, lymphoedema and to reduce the risk of recurrence of venous leg ulceration. Compression hosiery is also used for other conditions, such as to reduce the risk of thrombosis / recurrence of thrombosis
- It is essential to follow manufacturer's guidance for measurement and fitting. Ensure the manufacturer is specified on prescription as sizes and measurements vary between manufacturers
- Patients should be re-assessed every 3-6 months prior to issuing the next set of hosiery.

Contra-indications

- Holistic assessment to include limb assessment and ABPI to confirm arterial sufficiency must be done prior to recommending the use of compression hosiery

PLEASE NOTE; before elastic hosiery can be dispensed, the size, quantity (single or pair), name and class of garment must be specified by the prescriber. There are different compression values for graduated compression hosiery as indicated below.

Hosiery Compression Classes and Values			
Class	**British Standard**	**European**	**RAL**
Class 1 (light support)	14-17mmHg	18-21mmHg	18-21mmHg
Class 2 (medium support)	18-24mmHg	23-32 mmHg	23-32mmHg
Class 3 (strong support)	25-35mmHg	34-46mmHg	34-46mmHg

ACTIVA BRITISH STANDARD COMPRESSION HOSIERY® (L&R)

Ready-to-wear compression hosiery.

Indications
Class 1: Superficial or early varices and prevention of deep vein thrombosis while travelling.
Class 2: Medium varices / Treatment and prevention of venous leg ulcers and associated conditions / Mild oedema.
Class 3: Gross varices / Gross oedema / Treatment and prevention of venous leg ulcers and associated conditions /Post-thrombotic venous insufficiency.

Contraindications
- Diabetes (unless the patient is under medical or specialist nurse supervision)
- Significant arterial disease (ischaemia) according to vascular assessment
- Congestive cardiac failure (compression can lead to cardiac overload
- Known sensitivity to the fabric

Class	Description	Sizes
British Standard Class 1 14-17mmHg	Below knee (open or closed toe), colour: black, sand, honey.	S, M, L, XL, XXL
	Unisex Socks (Closed Toe), colour: Brown or Black	S, M, L, XL, XXL
British Standard Class 2 18-24mmHg	Below knee (open or closed toe), colour: black, sand, honey.	S, M, L, XL, XXL
	Unisex Socks (Closed Toe) colour: Brown or Black	S, M, L, XL, XXL
British Standard Class 3 25-35mmHg	Below knee (open toe). colour: sand	S, M, L, XL, XXL.
Liners 10mmHg	Below knee (closed toe); colour White Below knee (open toe). colour white or sand	S, M, L, XL, XXL
Hosiery Kit 40mmHg	Below Knee colour (Sand)	S, M, L, XL, XXL

ACTI LYMPH® EUROPEAN STANDARD HOSIERY (L&R)

European Standard, Ready-to-wear chronic oedema and lymphedema garments.

Indications
For the management of chronic oedema, lymphedema and lymphovenous conditions.

Contraindications

- Current acute inflammatory episode
- Acute deep vein thrombosis
- Fragile or damaged skin, although it may be used over an appropriate dressing
- Patients with diabetes or rheumatoid arthritis unless after specialist referral and under supervision, due to risk of microvascular disease
- Significant arterial disease (ischaemia) according to vascular assessment unless after specialist referral and under supervision and regular follow up
- Congestive heart failure as compression could lead to cardiac overload
- To be used with caution in patients with sensory disorders of the limb i.e. peripheral neuropathy

For large or irregular shaped limbs, compression bandaging may be required until the limb size and shape is suitable for a compression garment.

Class	Description	Sizes
European Standard Class 1 (18–21mmHg)	Below Knee Closed Toe no Top Band: standard (black and sand)	S, M, L, XL, XXL;
	Below Knee Closed Toe no Top Band: petite (sand)	S, M, L, XL.
	Below Knee Open Toe no Top Band: standard (black and sand)	S, M, L, XL, XXL.
European Standard Class 2 (23–32mmHg)	Below Knee Closed Toe no Top Band: standard (sand and black)	S, M, L, XL
	Below Knee Closed Toe no Top Band petite (sand)	S, M, L, XL
	Below Knee Open Toe no Top Band: standard (black)	S, M, L, XL
	Below Knee Open Toe no Top Band: petite (sand),	S, M, L, XL
European Standard Class 3 (34–46mmHg)	Below Knee Open Toe no Top Band; standard (sand),	S, M, L, XL.

MEDIVEN® RAL HOSIERY (Medi UK Ltd)

Available in open and closed toe RAL compression garments for the leg.

Indications
For the management of lymphoedema, venous disorders and associated conditions.

Contraindications

- Arterial circulation disorders
- Right heart failure
- Pre-existing gangrenous damage
- Neuropathy
- Inability to tolerate the stocking fabric

Class	Description	Sizes
RAL Class 1 (18–21mmHg)	Mediven Elegance Below knee standard, closed toe. Colour: Beige/Black	I – VII
	Mediven Elegance Below knee petite, closed toe. Colour: Beige/Black	I – VII
	Mediven Plus Below Knee standard, open toe. Colour: Beige/Black	I – VII (Available in extra wide calf)
	Mediven Plus Below Knee petite Colour: Beige/Black	I – VII (Available in extra wide calf)
	Mediven for men closed toe standard or petite. Colour: Black/Navy/Grey	I – VII
RAL Class 2 (23–32mmHg)	Mediven Elegance Below knee	I – VII
	Mediven Elegance Below knee petite	I – VII
	Mediven Plus Below Knee standard	I – VII (Available in extra wide calf)
	Mediven Plus Below Knee, petite	I – VII (Available in extra wide calf)
	Mediven for men closed toe standard or Petite. Colour: Black/Navy/Grey	I – VII
RAL Class 3 (34–46mmHg)	Mediven Plus Below Knee, open toe, standard. Colour: Beige/Black	I – VII (Also Available in extra wide calf)
	Mediven Plus Below Knee, open toe, petite	I – VII (Also Available in extra wide calf)
MEDIVEN ULCER KIT 40mmHg	Mediven Ulcer Kit Below Knee, open or closed toe. Colour: beige	I - VII

DUOMED SOFT BRITISH STANDARD HOSIERY (Medi UK Ltd)

Available in open and closed toe.

Indications

Class 1: Superficial or early varices and prevention of deep vein thrombosis while travelling.
Class 2: Medium varices / Treatment and prevention of venous leg ulcers and associated conditions / Mild oedema
Class 3: Gross varices / Gross oedema / Treatment and prevention of venous leg ulcers and associated conditions /Post-thrombotic venous insufficiency

Contraindications

- Arterial circulation disorders;
- Right heart failure
- Pre-existing gangrenous damage
- Neuropathy
- Inability to tolerate the stocking fabric

Class	Description	Sizes
British Standard Class 1 14-17mmHg	Below knee (open or closed toe), Colour: black/sand	S, M, L, XL, XXL
British Standard Class 2 18-24mmHg	Below knee (open or closed toe), Colour: black/sand	S, M, L, XL, XXL
British Standard Class 3 25-35mmHg	Below knee (open toe). Colour: black/sand	S, M, L, XL, XXL.

Other options are available in the Duomed soft hosiery range (Duomed soft 2 easy) – consult Tissue Viability for further information

JUXTA CURES® COMPRESSION GARMENT (Medi UK Ltd)

- ***TISSUE VIABILITY SERVICE ONLY***
- An alternative to bandaging for patients with active leg ulceration
- Encourages self-care
- Pressure system guide that helps to ensure that correct and consistent pressure (20, 30, 40 or 50mmHg) is applied to the lower leg. The system can be re-adjusted to maintain the pressure required
- Designed to be effective for 6 months of daily use
- Latex free
- Cut to fit
- The following accessories are also available: Comfort Leg liner kit contains two liners. Comfort compression anklet,

Juxta CURES	
NHSSC Codes	Sizes Available
EGD7218	Short kit
EGD7219	Standard kit
EGD7220	Long kit *NB Kits come with 1 pair of comfort liners and 1 pair of standard footlets.*
EGD7222	Comfort compression anklet Standard
EGD7223	Comfort compression anklet Large
	Leg Liner Kit – Community only (ONPOS)

(standard or large) contains two anklets

JUXTALITE® COMPRESSION GARMENT (Medi UK Ltd)

- An alternative to hosiery –for patients who cannot tolerate hosiery
- Can be used to treat existing ulceration, and to prevent future recurrence
- Encourages self-care
- Pressure system guide that helps to ensure that correct and consistent pressure (20, 30, 40 or 50mmHg) is applied to the lower leg. The system can be re-adjusted to maintain the pressure required.
- Designed to be effective for 6 months of daily use
- Latex free
- The following accessories are also available: Comfort Leg liner kit contains two liners. Comfort compression anklet (standard or large) contains two anklets

JUXTALITE	
NHSSC Codes	Sizes Available
EDG10380	Small Short
EDG10414	Small Long
EDG10290	Medium Short
EDG10334	Medium Long
EDG10407	Large short
EDG10308	Large Long
EDG10357	X Large Long *NB Kits come with 1 pair black liners with incorporated foot section. Juxta CURES liners and anklets can be used if needed.*
EGD7222	Comfort compression anklet standard
EGD7223	Comfort compression anklet Large
	Leg Liner Kit – Community only (ONPOS)

OFF-LOADING FOOTWEAR

KERRAPED SHOE ® (Crawford Pharmaceuticals)

- A walking shoe to accommodate bandages and casts, and to offload pressure from the foot
- Provides stability and comfort
- Can be adjusted to open-toe or closed-toe

KERRAPED SHOE	
NHSSC Codes	Sizes Available
ELY253	S (adults 2-5.5)
ELY252	M (adults 6-7.5)
ELY251	L (adults 8-10)
ELY250	XL (adults 10.5-13)

WATERPROOF PROTECTOR

LIMBO ® (Thesis Technology Products Ltd)

- ***Community Only***

- Waterproof bandage/cast protector
- Allows the user to have a bath or shower without getting their lower leg or foot dressing wet

LIMBO		
Patient Height	Patient Weight	Size
5’5 (165cm) and above	Up to 64kg	MP76 Slim Leg
	64-102kg	MP80 Average Build
	102-140kg	MP180 Large Leg
Under 5’5 (165cm)	Up to 64kg	MP76S Slim Leg Short
	64-102kg	MP80S Short Leg
	102-140kg	MP180S Large Leg Short

SPECIALIST PRODUCTS

2.21 ANTIMICROBIAL DRESSINGS

- Antimicrobial dressings should not be used for prevention purposes
- Antimicrobial dressings should not be used for more than a 2 week period without reviewing to monitor their effectiveness. In high risk patients, such as diabetics or those who are immuno-compromised, this therapy may be continued for up to 4 weeks if required
- If a wound does not show signs of improvement after 2 weeks of antimicrobial therapy, then the wound should be reassessed and a referral made to the Tissue Viability Service
- Always check for allergies/ sensitivities prior to use
- Antimicrobial dressings include: silver, honey, iodine, glucose-based, polyhexamethylene biguanide, dialkylcarbamoyl chloride

2.22 SILVER DRESSINGS

Indications

Silver is delivered to the wound via a variety of dressings. On contact with wound exudate, there is an exchange of Ag+ (dressing) with sodium ions Na+ (exudate). Therefore, when using silver as an antimicrobial, the volume of wound exudate should be considered.

Contra-indications

Silver-impregnated dressings should not be used routinely for the management of uncomplicated wounds.

ACTISORB®SILVER 220 (3M + KCl)

- An activated charcoal dressing encased in a nylon sleeve
- Designed to trap wound malodour while protecting the wound from infection
- Not to be used with dry wounds
- Should never be cut as particles of activated charcoal may enter the wound causing discolouration
- Should be removed prior to MRI scanning

ACTISORB SILVER 220	
NHSSC Codes	Sizes Available
ELV004	6.5x9.5cm
ELV002	10.5x10.5cm
ELV004	10.5x19.5cm

SILVERCEL NON-ADHERENT ® (3M + KCl)

- Antimicrobial non-adherent alginate dressing
- Composed of carboxmethylcellulose (CMC) and silver coated nylon fibers
- Highly absorbent for effective exudate management
- Should be removed prior to MRI scanning

SILVERCEL-NON-ADHERENT	
NHSSC Codes	Sizes Available
ELY314	5x5cm
ELY315	11x11cm
ELY318	10x20cm
ELY317	2.5x30.5cm

ATRAUMAN AG ® (Paul Hartmann)

- Non-adherent polyamide textile wound-contact layer
- 1mm pore size and impregnated with neutral triglycerides coated with metallic silver (touch and kill)
- Effective for up to 7 days
- Store flat, to ensure that ointment does not relocate to one side of the dressing
- Should be removed prior to MRI scanning

ATRAUMAN AG	
NHSSC Codes	Sizes Available
EKB039	5x5cm
EKB040	10x10cm
EKB041	20x10cm

2.23 HONEY DRESSINGS

Indications

- Medical grade honey has antimicrobial, anti-odour and anti-inflammatory properties and can be used for acute or chronic wounds.
- Medical grade honey has osmotic properties, producing an environment that promotes autolytic debridement

Contra-indications

- Honey dressings should not be used on patients with extreme sensitivity to honey, bee stings or bee products.
- Patients with diabetes should be monitored for changes in blood-glucose concentrations during treatment with topical honey or honey-impregnated dressings

L-MESITRAN OINTMENT® (H&R Healthcare)

- Contains 48% Medical Grade Honey and antioxidants

- Antibacterial properties
- Reduces malodour
- Aids debridement and reduces bacterial colonisation
- Suitable for a variety of wounds
- Can be recapped for up to 3 months for use on the same patient

L-MESITRAN OINTMENT	
NHSSC Codes	Sizes Available
ELZ131	20g
ELZ132	50g

ALGIVON PLUS ® (Advancis Medical)

- Reinforced alginate dressing impregnated with 100% medical grade Manuka honey
- Moderately exuding wounds

ALGIVON PLUS	
NHSSC Codes	Sizes Available
ELS549 ELS550	5x5cm 10x10cm

ACTILITE® (Advancis Medical)

- Gauze dressing impregnated with Manuka honey and Manuka oil.
- Antibacterial protection and odour control
- Suitable for all wound types where a primary layer is indicated and an antibacterial effect may be advantageous
- Safe to use over fungating tumour wounds/ and or fragile skin

ACTILITE		
NHSSC Codes	Sizes Available Acute	 Community
EJE079 EJE042 EJE040 EJE163	5x5cm 10x10cm 10X20cm 20x30cm	5x5cm 10x10cm 10X20cm 20x30cm 30x30cm (Community only)

2.24 GLUCOSE BASED DRESSINGS

Indications
- Maintains moist wound environment
- Continuously debrides wound
- Offers anti-microbial protection
- Hypoallergenic

Contra-indications
- Can be used on infected wounds but only under medical supervision
- Not indicated for third degree burns
- Cannot be used on eye lids or in the eye
- Not to be used in those sensitive to polyethylene glycol or alginates

FLAMINAL FORTE® (Flen Health)

- Alginate gel containing two anti-microbial enzymes, glucose oxidase and lactoperoxidase
- For moderate to heavily exuding wounds
- Store at room temperature (below 25c) in a dry place and in the original pack
- Re- cap the tube immediately after use, once opened, and if re-capped carefully, can be stored and used until the expiry date on the tube
- Single patient use

FLAMINAL FORTE	
NHSSC Codes	Sizes Available
ELG022	15g
ELG023	50g

FLAMINAL HYDRO® (Flen Health)

- Alginate gel containing two anti-microbial enzymes, glucose oxidase and lactoperoxidase.
- Contains lower proportion of alginate than Flaminal Forte
- Store at room temperature (below 25c) in a dry place and in the original pack
- Re- cap the tube immediately after use, once opened, and if re-capped carefully, can be stored and used until the expiry date on the tube
- Single patient use

FLAMINAL HYDRO	
NHSSC Codes	Sizes Available
ELG021	15g
ELG025	50g

2.25 IODINE DRESSINGS

Indications

- Broad spectrum antimicrobial which has long been used in the treatment and prevention of infection
- Active against a wide range of pathogens including MRSA

Contraindications

- Not indicated for the use of patients with known iodine hypersensitivity
- Not indicated for use in pregnancy/ lactating mothers or children under 2 years of age
- Used with caution in patients with severe renal impairment and thyroid disorders
- Betadine solutions (10%) should only be used as a skin prep or surgical scrub, and never on soft tissue, as they are toxic to fibroblasts and will rapidly dry tissue, potentially causing necrosis

INADINE® (3M + KCI)

- Knitted viscose sterile dressing, containing 10% providone-iodine, which in the presence of wound exudates is released
- Low adherent wound contact material and orange in colour
- Used in the treatment of infection in minor burns
  Superficial skin loss, leg ulcers and low exudating wounds
- Effective against anaerobes, pseudomonas, gram Positive and gram negative organisms

INADINE	
NHSSC Codes	Sizes Available
EKB501	5x5cm
EKB502	9.5x9.5cm

IODOSORB® (Smith and Nephew)

- Available as an ointment or a powder
- The ointment is made up of beads of Cadexomer and in the presence of wound exudates the beads in the ointment take up the fluid and swell slowly releasing iodine
- Ointment is placed directly onto the wound-to a depth of 3mm and covered with a suitable secondary dressing
- Treatment of chronic exuding wounds such as leg ulcers, diabetic ulcers or pressure ulcer- particularly when infection is present or suspected
- Not to be used in wounds with little or no exudate
- Use in sloughy wounds that require debridement of devitalised tissue

IODOSORB	
NHSSC Codes	Sizes Available
EKB010	3g powder
EKB012	10g ointment tube

IODOFLEX® (Smith and Nephew)

- Carrier gauze is removed from both sides of the paste, applied directly to the wound, then covered with a suitable secondary dressing
- Removal is by sterile water
- Depending on the nature of the wound, dressing changes can occur daily and can extend to 3 times a week
- Removal is best by irrigation of the wound
- More frequent changes will be required if ointment becomes saturated with exudate as indicated by loss of colour
- Should not be used for longer than 3 months

IODOFLEX	
NHSSC Codes	Sizes Available
EKB007	5g
EKB008	10g
EKB009	17g

2.26 POLYHEXAMETHYLENE BIGUANIDE (PHMB)

Indications

PHMB interferes with the bacterial cell metabolism. By prohibiting the cell's ability to absorb any nutrients or dispose of waste products, It effectively kills the bacteria without damaging surrounding healthy cells. PHMB kills multi-resistant pathogens including Methicillin-resistant staphylococcus aureus (MRSA) and vancomycin-resistant enterococci (VRE).

ACTIVHEAL PHMB FOAM ® (Advanced Medical Solutions)

- Available with and without adhesive
- Foam pad with a pink, low friction, waterproof film backing
- Wound contact layer side of dressing has a clear perforated film to prevent adherence
- For moderate to heavily exuding wounds
- Do not use on patients with a known sensitivity to PHMB

ACTIVHEAL PHMB FOAM	
NHSSC Codes	Sizes Available
ELA807	10x10cm adhesive
ELA810	15x15cm adhesive
ELA788	5x5cm non-adhesive
ELA789	7.5x7.5cm non-adhesive
ELA790	10x10cm non-adhesive
ELA792	15x15cm non-adhesive

PRONTOSAN® WOUND-GEL X (B Braun)

- A colourless, viscous gel containing betaine (a gentle surfactant that disturbs and removes biofilm and wound debris)
- Contains PHMB to help control bacteria

PRONTOSAN WOUND GEL X	
NHSSC Codes	Sizes Available
ELZ542	50g

2.27 DIALKYLCARBAMOYL CHLORIDE (DACC)

Dialkylcarbomoylchloride (DACC) coated dressings irreversibly bind bacteria at the wound surface, which is then removed when the dressing is changed.

CUTIMED SORBACT SWAB ® (BSN Medical)

- Dressing can be used folded or unfolded
- Primary dressing
- For colonised or infected wounds
- Suitable for fungal infections in the groin, skin folds or between digits

CUTIMED SORBACT SWAB	
NHSSC Codes	Sizes Available
ELY212	4x6cm
ELY213	7x9cm

CUTIMED SORBACT RIBBON ® (BSN Medical)

- For cavity wounds / tracts showing signs of infection

CUTIMED SORBACT RIBBON	
NHSSC Codes	Sizes Available
ELY218	2 x 50cm

CUTIMED SORBACT DRESSING PAD ® (BSN Medical)

- DACC coated hydrophobic antimicrobial dressing designed to absorb exudate and bind bacteria under moist wound conditions

SORBACT DRESSING PAD	
NHSSC Codes	Sizes Available
ELY214	7x9cm
ELY215	10x10cm
ELY219	10x20cm

2.28 PROTEASE MODULATOR

- ***For use only if recommended by Tissue Viability/Other Specialist***

Protease activity prolongs the inflammatory phase of wound healing and delays granulation. Modulation of such activity will help promote healing.

Indications:

- For use on chronic wounds
- Will continue to work as long as they are in direct contact with the wound
- Frequency of change is determined by exudate levels

Contra-indications:

- Known sensitivity to ingredients
- Heavy exuding wounds
- Dry necrotic wounds
- Wounds requiring antimicrobials (with the exception of Promogran Prisma™)

URGOSTART ® (Urgo Medical)

- Technology lipido-colloid nano-oligosaccharide factor (TLC-NOSF) healing matrix
- Absorbent silicone foam format
- Atraumatic and pain-free removal
- Conformable and easy to reposition
- Contraindicated in cancerous wounds
- Not to be used for wound debridement

URGOSTART	
NHSSC Codes	Sizes Available
ELA417	6x6cm
ELA418	10x10cm
ELA626	15x20cm

URGOSTART PLUS PAD ® (Urgo Medical)

- A polyabsorbent fibre pad, impregnated with the
- Technology lipido-colloid nano-oligosaccharide factor (TLC-NOSF) healing matrix
- The NOSF inhibits excess matrix metalloproteinases and the poly-absorbent fibres bind, trap and retain debris, exudate and slough,

URGOSTART PLUS PAD	
NHSSC Codes	Sizes Available
ELZ884	6x6cm
ELZ885	10x10cm
ELZ886	15x20cm

keeping the wound clean whilst healing
- Atraumatic and pain-free removal
- Conformable and easy to reposition
- Contraindicated in cancerous wounds
- Can be used for debridement of loose slough, where a protease modulating dressing is required

PROMOGRAN™ (3M + KCl)

- Promogran is sterile, freeze dried composite of 45% oxidized regenerated cellulose (ORC) and 55% collagen.
- Maintains an optimal wound healing environment conducive to granulation tissue formation, epithelialisation and rapid wound healing.
- For management of chronic wounds which are clear of necrotic tissue
- Excess product should not be removed at dressing changes in order to avoid disrupting wound healing

PROMOGRAN	
NHSSC Codes	Sizes Available
ELZ001	28cm sq Hexagon

PROMOGRAN PRISMA™ (3M + KCl)

- Promogran prisma is sterile, freeze dried composite of 44% oxidized regenerated cellulose (ORC), 55% collagen and 1% silver-ORC.
- Maintains an optimal wound healing environment conducive to granulation tissue formation, epithelialisation and rapid wound healing.
- For management of chronic wounds which are clear of necrotic tissue
- Excess product should not be removed at dressing changes in order to avoid disrupting wound healing

PROMOGRAN PRISMA	
NHSSC Codes	Sizes Available
ELZ086	28cm sq Hexagon

2.29 NEGATIVE PRESSURE WOUND THERAPY

Negative Pressure Wound Therapy is an advanced therapy used to promote healing in acute or chronic wounds. A vacuum source creates create sub-atmospheric pressure in the local wound environment. This therapy requires specific wound dressings for use with the vacuum pump equipment.

Indications

- Acute wounds
- Partial thickness burns, flaps and grafts
- Sub-acute wounds (surgical dehiscence)
- Chronic wounds (pressure ulcers/ diabetic wounds)

Contra-indications

- Malignancy in the wound except in palliative care to enhance quality of life
- Untreated osteomyelitis
- Non-enteric and unexposed fistulae
- Necrotic tissue with eschar present
- Direct placement of dressing over exposed arteries, veins or organs

RENASYS ® (Smith & Nephew)

Gauze and Foam dressing kits with easy-to-use Soft port technology for use with RENASYS TOUCH and RENASYS EZ PLUS negative pressure wound therapy devices.

NHS SC Codes	Consumable	Sizes Available
ELZ509	Foam Kit	RENASYS-F with Soft port Small
ELZ510	Foam Kit	RENASYS-F with Soft port Medium
ELZ511	Foam Kit	RENASYS-F with Soft port Large
ELZ519	Foam Kit (Abdominal)	Foam Dressing Kit Abdominal hydrophobic foam
ELZ512	Gauze Kit	RENASYS-G with Soft port Small
ELZ513	Gauze Kit	RENASYS-G with Soft port Medium
ELZ514	Gauze Kit	RENASYS-G with Soft port Large
ELZ530	Gauze Kit	RENASYS-G 10Fr Round Drain Gauze kit
ELZ531	Gauze Kit	RENASYS-G 10mm Flat drain Gauze kit
ELZ532	Gauze Kit	RENASYS-G 15Fr Channel Drain Gauze kit
ELZ533	Gauze Kit	RENASYS-G 19Fr Round Drain Gauze kit
ELZ718	Canister	300ml
ELZ719	Canister	800ml
ELZ249	Occlusive Drape	20 x 30cm
ELZ426	Gauze Filler	15cm x 17cm
ELZ729	Carrying Case	One size
ELZ730	Carry Case Strap	One size
ELZ518	Soft port Y connector	One size
ELZ440	Negative Pressure Wound Therapy Accessories hydro adhesive gel dressing	7cm x 10cm

PICO 7® (Smith & Nephew)
A disposable and portable system designed to promote wound healing using NPWT at a preset pressure. It contains one PICO device (battery designed to last for 7 days) and two PICO dressings.

Indications

- Chronic, acute, traumatic and dehisced wounds
- Partial-thickness burns
- Diabetic ulcers or pressure ulcers
- Flap and graft sites
- Surgically closed incision sites

Contra-indications

- Malignancy in the wound bed or wound margins (except in palliative care to enhance quality of life)
- Previously confirmed and untreated osteomyelitis
- Non-enteric and unexplored fistulas
- Necrotic tissue with eschar present
- Exposed arteries, veins, nerves or organs
- Anastomotic sites
- Emergency airway aspiration
- Pleural, mediastinal or chest tube drainage
- Surgical suction

PICO 7	
NHS SC Codes	Sizes Available
ELZ899	10x20cm
ELZ890	10x30cm
ELZ902	10x40cm
ELZ901	15x15cm
ELZ903	15x20cm
ELZ904	15x30cm
ELZ905	20x20cm
ELZ906	25x25cm

2.30 LARVAE THERAPY (MAGGOTS)

Sterile larvae are used primarily for the debridement of necrotic, infected and sloughy tissue from chronic wounds. In most cases this greatly improves the condition of a wound and promotes healing, often catalysing the initiation of the healing process.

Indications

- For the debridement of necrotic, infected and sloughy tissue.

Contra-indications

- Patient objection
- Wounds that have a tendency to bleed easily
- Wounds with a known fistula

BIOBAG® (Biomonde Ltd)

The larvae, along with either one or multiple foam spacers, are sealed within

BioBag dressings come in varying sizes and are applied according to the nature and size of the wound being treated. The larvae remain sealed within a finely woven polyester net pouch throughout the treatment making the application and removal of larvae significantly easier for clinicians.

Larval secretions penetrate through the net where necrotic & non-viable tissue is liquefied; proteinaceous material is then taken back and ingested by the larvae.

BioBags are simply placed on the wound areas that need to be debrided and covered with an appropriate secondary dressing. They can be left on the wound for up to four days.

*The number of larvae required will be based upon the dimensions of each individual wound.

LARVAE		
NHS SC Codes	Type	Sizes Available
BB50	BioBag	2.5x4cm
BB100	BioBag	4x5cm
BB200	BioBag	5x6cm
BB300	BioBag	6x12cm
BB400	BioBag	10x10cm

For advice on how to order larvae therapy please consult your Tissue Viability Service.

2.31 LIMITED USE ONLY PRODUCTS

MELOLITE® (Smith & Nephew)

- ***Listed for podiatry only***
- Absorbent, double-sided low-adherent pad
- Either side of the dressing can be placed against the wound site

MELOLITE	
NHSSC Code	Sizes Available
EJE171	7.5x5cm

MELOLIN® (Smith & Nephew)

- ***Listed for podiatry only***
- Absorbent cotton and polyester fibre pad with a hydrophobic backing layer which is heat bonded on one side to a very thin perforated polyester film.
- The film side of the dressing is placed next to the wound.
- Retains its integrity when cut.

MELONIN	
NHSSC Code	Sizes Available
EJE011 EJE013	5x5cm 10x10cm

MEPILEX LITE ® (Molnlycke Healthcare)

- ***Listed for hand clinic only***
- Soft wound silicone wound contact layer, a flexible absorbent pad and a film backing

MEPILEX LITE	
NHSSC Code	Sizes Available
ELA182 ELA184	6x8.5cm 10x10cm

POLYMEM ® (Aspen Medical Europe)

- ***Listed for use with burns, to include radiotherapy-induced skin reactions***
- Non-adhesive thin polyurethane foam dressing with vapour-permeable film backing
- Dressing structure contains a tissue-friendly wound cleansing agent and glycerol

POLYMEM	
NHSSC Codes	Sizes Available
ELA303 ELA305 ELA306	10x10cm 13x13cm 17x19cm
POLYMEM FINGER/TOE DRESSINGS	
NHSSC Codes	Sizes Available
ELA1159 ELA1160 ELA1161	Size 1 (Fits toe/finger circumference 46.8mm – 57.6mm) Size 2 (Fits toe/finger circumference 57.6mm - 67.8mm) Size 3 (Fits toe/finger circumference 67.8mm - 68.5mm)

FLAMIGEL RT® (Flen Health)

- ***Listed for the management and prevention of radiotherapy induced skin reactions:***
- Hydroactive colloid gel
- Forms a protective film, stopping any microorganisms from entering the skin
- Reduces intensity of early symptoms of radiotherapy-induced skin reactions to include: red, dry, itchy, painful skin
- Contains polyethylene and arginine

FLAMIGEL RT	
NHSSC Codes	Sizes Available
ELY815	40g

URGOCLEAN AG ® (Urgo)

- ***Listed for podiatry and vascular use only***

- Contains poly-absorbent fibres for absorbency
- Contain silver – anti-biofilm and antimicrobial properties
- To be used for the treatment of infection, not to be used routinely for the prevention of infection
- Should not be used for large cavity wounds
- Should be removed prior to MRI scanning

URGOCLEAN AG	
NHSSC Codes	Sizes Available
ELY609	6x6cm
ELY610	10x10cm
ELY611	15x20cm

ACTIVHEAL TRACHEOSTOMY DRESSING ® (Advanced Medical Solutions)

- ***Listed for use on tracheostomy sites***

ACTIVHEAL TRACHEOSTOMY	
NHSSC Codes	Sizes Available
ELA 335	10x10cm

ADVAZORB FIXATION POST-DECANNULATION TRACHEOSTOMY DRESSING
(Advancis Medical)

- ***Listed for use in ITU only***

ADVAZORB FIXATION POST-CANN TRACHEOSTOMY	
NHSSC Codes	Sizes Available
FDH605	10x12cm

LEUKOPLAST SLEEK® (BSN Medical)

- ***Listed for use in paediatrics only for protection of hip spica***

LEUKOPLAST SLEEK	
NHSSC Codes	Sizes Available
EHH031	2.5cmx5m
EHH032	5cm x 5m
EHH033	7.5cm x 5m

HOSPILITE (Paul Hartmann Ltd)

- ***Listed for use in plaster room and orthopaedic departments only***
- Type 2 light support bandage without fastening

HOSPILITE	
NHSSC Codes	Sizes Available
ECA195	5cmx4.5m
ECA194	7.5cmx4.5m
ECA195	10cmx4.5m
ECA196	15cmx4.5m

INTERDRY® (Coloplast)

- ***Tissue Viability Recommendation only***
- ***Community setting only***
- ***For the management of intertrigo - a form of moisture-associated skin damage commonly found in body regions such as groins, armpits, and under the breasts***

- Wicks and moves moisture away in skin-to-skin contact areas
- Reduces skin-to-skin friction
- Fights bacteria and fungi – contains silver

INTERDRY
Sizes Available
25cm x 366cm (roll) 25cm x 91cm (pouch)

3.0 References

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APPENDIX 1

South Tyneside Medicines Management Committee and Sunderland Medicines Optimisation & Guidelines Group

New Wound Management Product Request Form

1.0 PRODUCT DETAILS:

Name of Product *(generic & brand name)*	
Form/ Sizes Available	
Licensed Indication(s)	
Intended Indication(s) for use *(if different from or in addition to the above)*	

2.0 EVIDENCE TO SUPPORT APPLICATION

Summary of Evidence In Support Of Requested Product
Please provide any relevant clinical evidence that may be beneficial in support of this application
What monitoring (efficacy & adverse effects) is required for this product? Please state if this is different from the current situation

3.0 FORMULARY IMPLICATIONS:

Which formulary product(s) will this replace or is there no comparable product on the formulary currently?
Please describe below how the product compares with the existing formulary product(s) or treatment with regard to: Efficacy: Safety: Tolerability & Acceptability: Cost effectiveness:
Please include guidelines for the use of the new product, indicating its place in the therapy of the intended indication in relation to other formulary products

4.0 FINANCIAL AND OTHER IMPLICATIONS:

Estimate number of patients/ patient group requiring new product per annum	
Specify annual CHANGE to medicine budget expenditure:	

Secondary Care	**In Primary Care**
Specify any other costs incurred by change in treatment e.g. extra monitoring requirements	

5.0 SHARED CARE ARRANGEMENTS:

Is the product intended for community services to continue care? Yes / No
Is there a need for shared care protocol? Yes / No* *(* circle as appropriate)*
When would community services be expected to take on prescribing?

6.0 CONFLICTS OF INTEREST

Please declare any relevant or associated interests that may conflict with your request
E.g. funding of research, equipment, visits to conferences

Declaration of Conflict of Interest	

7.0 APPLICATION FORM COMPLETED BY:

Name of CONSULTANT or equivalent position in service :

Signature: …… Date: ……

7.0 APPLICATION FORM SUPPORTED BY:

Name of CLINICAL LEAD :……

Department: ……

Signature: …… Date: ……