## **WOUND DRESSING SELECTION CHART**

South Tees Hospitals **MHS** 

These are suggested dressings – please refer to the Formulary for further guidence.

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	Aims of Care	Exudate	Consider using		Special Notes
Necrotic			Primary dressing	Secondary dressing	A holistic assessment is essential
	Debride eschar and promote moisture balance N.B. DO NOT debride hard, black necrosis on heels or ischaemic limbs. Refer to appropriate specialist.	Low	Hydrocolloid – Duoderm Thin Hydrogel – Kerralite Cool or Flaminal Hydro Honey – MediHoney Wound gel or HCS Honey – Algivon Plus	Film – C-View Film / C-View Post-Op or Mepitel Film if skin is friable  Super Absorbent – Kliniderm, Kerramax Care or Sorbion Sana	Inappropriate care can lead to delayed wound healing for patients and unnecessarily high costs for the healthcare provider.
Sloughy	De-slough and provide healthy bed for granulation; promote moisture balance.	Low Moderate	Hydrogel – Kerralite Cool or Flaminal Hydro  Iodine – Iodoflex Alginate – Sorbsan, Flaminal Forte Hydrofiber – Aquacel Extra or Foam Alginate – Urgosorb Foam – Mepilex XT	Film – C-View Film / C-View Post-Op or Mepitel Film if skin is friable Foam – Mepilex Border or Mepilex XT, Urgotul Absorb Border	ALWAYS use the most appropriate primary dressing (in contact with the wound and to the size of the wound) and only use a secondary dressing when necessary.  Protect peri-wound skin if necessary
		High	Gelling Fibre – Kytocel	<b>Super Absorbent –</b> Kliniderm, Kerramax Care or Sorbion Sana	to prevent excoriation.
Granulating		Low	<b>Low / non-adherent dressing</b> Atrauman, Urgotul, Mepitel One	<b>Film –</b> C-View Film / C-View Post-Op or Mepitel Film if skin is friable	Frequency of dressing change depends on level of exudate.  Always dress as appropriate.
	Provide healthy bed for epithelialisation and	Moderate	<b>Foam –</b> Mepilex Border or Mepilex XT, Urgotul Absorb Border	<b>Foam –</b> Mepilex Border or Mepilex XT, Urgotul Absorb Border	Skin tears – apply non-adherent dressing and leave for 7 days.
	promote moisture balance.	High	Alginate – Sorbsan, Flaminal Forte Hydrofiber – Aquacel Extra or Foam	<b>Super Absorbent –</b> Kliniderm, Kerramax Care or Sorbion Sana	<b>Diabetic Foot</b> – please ensure patient under care of Diabetic Podiatrist.
Epithelialising		Low	<b>Low / non-adherent dressing</b> Atraumen, Urgotul, Mepitel One	Island Dressing - C-View Post-Op	Povitulle may be used to protect the wound.
	Promote epithelialisation and wound maturation.	Moderate	<b>Foam –</b> Mepilex Border or Mepilex XT, Urgotul Absorb Border	<b>Foam –</b> Mepilex Border or Mepilex XT, Urgotul Absorb Border	Leg Ulcers / compression
		High		<b>Super Absorbent –</b> Kliniderm, Kerramax Care or Sorbion Sana	A full leg ulcer assessment MUST be completed by a competent practitioner prior to application of compression.
Infected		Low	Non-Adherent – Urgotul SSD	Dressing Pad	
	Manage infection and associated wound characteristics.	Moderate	Iodine – Iodoflex Alginate – Flaminal Forte Hydrofiber – Aquacel AG + Extra	<b>Foam –</b> Mepilex Border or Mepilex XT, Urgotul Absorb Border	<b>ONLY</b> use antimicrobial dressings if the wound is confirmed as infected or
		High	<b>Gelling Fibre –</b> Kytocel <b>Alginate –</b> Urgosorb Silver	<b>Super Absorbent –</b> Kliniderm, Kerramax Care or Sorbion Sana	critically colonised. Review treatment plan every two weeks, updating accordingly.