

Restore Calcium Alginate Dressing



Protocol

This protocol is intended to supplement, not replace, your facility's guidelines and/or common practices.

Desired Outcomes

- To maintain a moist wound environment for the healing of partial- to full-thickness wounds
- To manage wounds with moderate to heavy exudate

Equipment

1. Restore Calcium Alginate Dressing
2. Restore Wound Cleanser or other solution, as indicated, for wound cleansing
3. Wound measuring guide
4. Gauze or other dry material to dry periwound skin
5. Secondary cover dressing
6. Gloves

Parts of Procedure

- Preparation of wound area
- Application of dressing
- Removal of dressing

Preparation of Wound Area

1. Wash hands.
2. Assemble equipment and take to bedside.
3. Identify and inform patient of procedure.
4. Provide for privacy.
5. Position patient so that wound area is exposed. *(Remove dressing if present).*
6. Thoroughly rinse or irrigate the wound area with Restore Wound Cleanser or normal saline, if appropriate. *(If necessary, the wound should be debrided).*
7. Clean and dry the periwound skin to allow for secure adhesion of the secondary dressing.
8. Measure the wound using the wound measuring guide.

Application of Dressing

1. Remove dressing from package. *(Restore Calcium Alginate Dressings are provided in sterile packages if aseptic technique is required).*
2. Apply dressing to wound surface. *(The dressing may be trimmed to fit the wound size. Deep wounds should be loosely packed).*
3. Cover Restore Calcium Alginate Dressing with an appropriate secondary dressing and secure. *(Restore Calcium Alginate Dressing is made from calcium sodium alginate which forms a conformable protective gel when it comes in contact with exudate. The gel forms a moist wound interface providing an environment conducive to moist healing).*

Removal of Dressing

1. Put on gloves.
2. Remove secondary dressing and discard.
3. Remove the Restore Calcium Alginate Dressing. Dressing maintains integrity when saturated and is easily removable in one piece. *(If any portion of the dressing adheres to the wound bed, moisten the dressing before removal).*
4. If needed, gently rinse away remaining gel or dressing fibers.
5. Wash hands.
6. Document dressing change, wound measurements and other pertinent observations regarding the wound or periwound site.

Note: Dressing change frequency will depend on patient condition and the level of exudate.

Assess

Key observations to document with wound dressing change:

- Size
- Extent of tissue involvement (partial-thickness, full-thickness, stage)
- Presence of undermining or tunnelling
- Anatomic location
- Wound base (granulation, epithelialization, muscle, subcutaneous tissue, nonviable tissue, color, exudate amount/odor/color)
- Edge of open wound
- Presence of foreign bodies
- Condition of surrounding skin
- Duration of wound

Plan

Topical Management Priorities

- Remove nonviable tissue
- Prevent and manage infection
- Eliminate dead space
- Manage excess exudate
- Maintain a moist wound surface
- Provide thermal insulation
- Protect wound and periwound skin

Calcium Alginate Dressing Advantages:

- Maintain moist wound environment
- Fill in dead space
- Absorb excess exudate for moderate to heavily exuding wounds
- Form a gel which creates a moist wound interface

Implement

- Follow protocol for Restore Calcium Alginate Dressing
- Reduce or eliminate factors that may interfere with wound healing
- Provide systemic support for wound healing

Evaluate

- Reassess wound with each dressing change
- Frequency of dressing changes should be dictated by facility protocol
- Discontinue calcium alginate dressing if wound has minimal exudate or is dry. If no progress can be demonstrated within 2 to 4 weeks, reevaluate the overall treatment plan as well as adherence to this plan, making modifications as necessary

Ordering Information

Restore Calcium Alginate Dressing

| | Stock No | Unit of Sale |
|----------------------------------|----------|--------------|
| 2" x 2", Sterile (5 cm x 5 cm) | 529938 | 10 |
| 4" x 4", Sterile (10 cm x 10 cm) | 529937 | 10 |
| 4" x 8", Sterile (10 cm x 20 cm) | 529939 | 5 |
| 12" Rope, Sterile (30.5 cm) | 529940 | 5 |

Restore Wound Cleanser

| | | |
|---|--------|--------|
| 8 oz. (236 mL) Trigger Spray Bottle, Non-Sterile | 529975 | 12/box |
| 12 oz. (354 mL) Trigger Spray Bottle, Non-Sterile | 529976 | 12/box |

References:

Cooper DM. Wound Assessment and Evaluation of Healing, Acute and Chronic Wounds/Nursing Management, Bryant RA (ed.). St Louis: Mosby Year Book, 1992. Doughty DB. Principles of Wound Healing and Wound Management, Acute and Chronic Wounds/Nursing Management, Bryant RA (ed.). St. Louis: Mosby Year Book, 1992. Agency for Healthcare Policy and Research. Clinical Practice Guideline #15, Treatment of Pressure Ulcers, December, 1994.

See Instructions for Use for important information regarding the use of this product at www.hollisterwoundcare.com/products/ifus.html.



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