

Hollister Wound Care

Hollister
Wound Care



Silver Dressings from Hollister Wound Care

- **Restore** Contact Layer Dressing, Silver with TRIACT Technology
- **Restore** Foam Dressing, Silver with TRIACT Technology
 - *with Silver Sulfate activated by exudate*
- **Restore** Calcium Alginate Dressing, Silver
 - *with Ionic Silver Complex activated by exudate*

Caution: Federal laws restricts this device to sale or on the order of a physician or licensed healthcare professional.


hollisterwoundcare

An alliance of Hollister Incorporated and Laboratoires URGO

www.hollisterwoundcare.com

Table of Contents • Hollister Wound Care

Medicare Utilization Chart	pages 108-114
Restore Wound Dressings with TRIACT Technology	page 115
Restore Contact Layer Dressing	115
Restore Contact Layer Silver Dressing	115
Restore Foam Dressing, Adhesive	115
Restore Foam Dressing, Non-Adhesive	115
Restore Foam Dressing, Silver, Non-Adhesive	115
Restore Wound Dressings	pages 116-118
Restore Calcium Alginate Dressing	116
Restore Calcium Alginate Dressing, Silver	116
Restore Hydrogel Dressing	116
Restore Hydrocolloid Dressing	117
Restore Extra Thin Hydrocolloid Dressing	117
Restore Hydrocolloid Dressing with Foam Backing	117
Restore Odor-Absorbent Dressing	118
Wound Cleanser	page 118
Restore Wound Cleanser	118
Skin Care	page 119
Restore Skin Cleanser	119
Restore Cleanser & Moisturizer	119
Restore DimethiCreme Skin Protectant	119
Restore Moisture Barrier Skin Ointment	119
Restore Skin Conditioning Creme	119
Glossary	120-123

HCPCS Codes Disclaimer

The reimbursement information provided by Hollister Wound Care LLC is intended to provide general information relevant to coding and reimbursement of Hollister Wound Care products only. Reimbursement policies can vary considerably from one insurer to another. Coverage and payment policies for the same insurer, such as Medicare, can vary from one region to another, and may change from time to time. Hollister Wound Care does not guarantee coverage or payment of products listed in this catalog. This information is designed as a guideline only.

HCPCS codes shown in the Product Catalog are effective 1-1-08.

Explanation of Third Party Code Reimbursement System (National Health Related Items Code)

To facilitate reimbursement of Hollister Wound Care products, some Third Party Payment Programs require the use of an eleven digit reimbursement number. Every Hollister Wound Care manufactured product can be identified by an eleven digit number. The first five numbers identify the manufacturer's labeler code and the last six numbers represent the product stock number. The labeler code for Hollister Wound Care LLC is 08567. In order to utilize this coding system, simply combine the five digit labeler code with a product's six-digit stock number. You can follow this example.

To code a six-digit stock number:

The Third Party Reimbursement Number for Restore Contact Layer Silver Dressing with TRIACT Technology, Stock Number 509341, listed in the catalog on page 115 is:

08567-5093-41

08567 identifies Hollister Wound Care LLC, and 5093-41 identifies the product Stock Number.

Medicare Usual Dressing Change Frequency for Wound Care Supplies

The quantity and type of dressings dispensed at any one time must take into account the current status of the wound(s), the likelihood of change, and the recent use of dressings. Dressing needs may change frequently, especially in the early phases of wound treatment and/or with heavily draining wounds. Surgical dressings must be tailored to the specific needs of an individual patient. The table below lists some coverage guidelines and usual dressing change frequencies. The medical necessity for more frequent dressing changes must be clearly documented in the patient's medical record.

*Per LCD for Surgical Dressings (L11471) TriCenturion, Effective Jan. 1, 2007
Incorporated code changes per Medicare DME PSC Bulletin Bul20080118HCPCS2008*

HCPCS	Long Description	Frequency of Change	Wound Condition
A4450	Tape, non-waterproof, per 18 square inches	based on drsg size	
A4452	Tape, waterproof, per 18 square inches	based on drsg size	
A4461	Surgical dressing holder, non-reusable, each	*	
A4463	Surgical dressing holder, reusable, each	*	
A4465	Non-elastic binder for extremity	*	
A4649	Surgical supply; miscellaneous	*	
A6010	Collagen based wound filler, dry form, per gram of collagen	*	
A6011	Collagen based wound filler, gel/paste, per gram of collagen	*	
A6021	Collagen dressing, pad size 16 sq in or less, each	*	
A6022	Collagen dressing, pad size more than 16 sq in but less than or equal to 48 sq in, each	*	
A6023	Collagen dressing, pad size more than 48 sq in, each	*	
A6024	Collagen dressing wound filler, per 6 inches	*	
A6025	Gel Sheet for dermal or epidermal application, (E.G., silicone, hydrogel, other), each	*	
A6154	Wound pouch, each	3/wk	
A6196	Alginate or other fiber gelling dressing, wound cover, pad size 16 sq in or less, each dressing	1/day	mod-high exudate
A6197	Alginate or other fiber gelling dressing, wound cover, pad size more than 16 sq in but less than or equal to 48 sq in, each dressing	1/day	mod-high exudate
A6198	Alginate or other fiber gelling dressing, wound cover, pad size more than 48 sq in, each dressing	1/day	mod-high exudate
A6199	Alginate or other fiber gelling dressing, wound filler, per 6 inches	2 units (12 in.)/day	mod-high exudate
A6200	Composite dressing, pad size 16 sq in or less, without adhesive border, each dressing	3/wk	**

* No established usual maximum, refer to Medicare Utilization Guidelines.

** Bul20060901 SURG DSG, TriCenturion, Effective October 1, 2006
These codes are not valid for Medicare Submission.

HCPCS	Long Description	Frequency of Change	Wound Condition
A6201	Composite dressing, pad size more than 16 sq in but less than or equal to 48 sq in, without adhesive border, each dressing	3/wk	**
A6202	Composite dressing, pad size more than 48 sq in, without adhesive border, each dressing	3/wk	**
A6203	Composite dressing, pad size 16 sq in or less, with any size adhesive border, each dressing	3/wk	
A6204	Composite dressing, pad size more than 16 sq in but less than or equal to 48 sq in, with any size adhesive border, each dressing	3/wk	
A6205	Composite dressing, pad size more than 48 sq in, with any size adhesive border, each dressing	3/wk	
A6206	Contact layer, 16 sq in or less, each dressing	1/wk	line the wound
A6207	Contact layer, more than 16sq in but less than or equal to 48 sq in, each dressing	1/wk	line the wound
A6208	Contact layer, more than 48 sq in, each dressing	1/wk	line the wound
A6209	Foam dressing, wound cover, pad size 16 sq in or less, without adhesive border, each dressing	3/wk	mod-heavy exudate
A6210	Foam dressing, wound cover, pad size more than 16 sq in but less than or equal to 48 sq in, without adhesive border, each dressing	3/wk	mod-heavy exudate
A6211	Foam dressing, wound cover, pad size more than 48 sq in, without adhesive border, each dressing	3/wk	mod-heavy exudate
A6212	Foam dressing, wound cover, pad size 16 sq in or less, with any size adhesive border, each dressing	3/wk	mod-heavy exudate
A6213	Foam dressing, wound cover, pad size more than 16 sq in but less than or equal to 48 sq in, with any size adhesive border, each dressing	3/wk	mod-heavy exudate
A6214	Foam dressing, wound cover, pad size more than 48 sq in, with any size adhesive border, each dressing	3/wk	mod-heavy exudate
A6215	Foam dressing, wound filler, per gram	1/day	mod-heavy exudate
A6216	Gauze, non-impregnated, non-sterile, pad size 16 sq in or less, without adhesive border, each dressing	3/day	
A6217	Gauze, non-impregnated, non-sterile, pad size more than 16 sq in but less than or equal to 48 sq in, without adhesive border, each dressing	3/day	
A6218	Gauze, non-impregnated, non-sterile, pad size more than 48 sq in, without adhesive border, each dressing	3/day	
A6219	Gauze, non-impregnated, non-sterile, pad size 16 sq in or less, with any size adhesive border, each dressing	1/day	

* No established usual maximum, refer to Medicare Utilization Guidelines.

** Bul20060901 SURG DSG, TriCenturion, Effective October 1, 2006
These codes are not valid for Medicare Submission.

Medicare Utilization

HCPGS	Long Description	Frequency of Change	Wound Condition
A6220	Gauze, non-impregnated, non-sterile, pad size more than 16 sq in but less than or equal to 48 sq in, with any size adhesive border, each dressing	1/day	
A6221	Gauze, non-impregnated, non-sterile, pad size more than 48 sq in, with any size adhesive border, each dressing	1/day	
A6222	Gauze, impregnated with other than water, normal saline, or hydrogel, pad size 16 sq in or less, without adhesive border, each dressing	1/day	
A6223	Gauze, impregnated with other than water, normal saline, or hydrogel, pad size more than 16 sq in but less than or equal to 48 sq in, without adhesive border, each dressing	1/day	
A6224	Gauze, impregnated with other than water, normal saline, or hydrogel, pad size more than 48 sq in, without adhesive border, each dressing	1/day	
A6228	Gauze, impregnated with water or normal saline, pad size 16 sq in or less, without adhesive border, each dressing	*	
A6229	Gauze, impregnated with water or normal saline, pad size more than 16 sq in but less than or equal to 48 sq in, without adhesive border, each dressing	*	
A6230	Gauze, impregnated with water or normal saline, pad size more than 48 sq in, without adhesive border, each dressing	*	
A6231	Gauze, impregnated, hydrogel, for direct wound contact, pad size 16 sq in or less, each dressing	1/day	min - no exudate
A6232	Gauze, impregnated, hydrogel, for direct wound contact, pad size more than 16 sq in but less than or equal to 48 sq in, each dressing	1/day	min - no exudate
A6233	Gauze, impregnated, hydrogel, for direct wound contact, pad size more than 48 sq in, each dressing	1/day	min - no exudate
A6234	Hydrocolloid dressing, wound cover, pad size 16 sq in or less, without adhesive border, each dressing	3/wk	light-mod exudate
A6235	Hydrocolloid dressing, wound cover, pad size more than 16 sq in but less than 48 sq in, without adhesive border, each dressing	3/wk	light-mod exudate
A6236	Hydrocolloid dressing, wound cover, pad size more than 48 sq in, without adhesive border, each dressing	3/wk	light-mod exudate
A6237	Hydrocolloid dressing, wound cover, pad size 16 sq in or less, with any size adhesive border, each dressing	3/wk	light-mod exudate
A6238	Hydrocolloid dressing, wound cover, pad size more than 16 sq in but less than 48 sq in, with any size adhesive border, each dressing	3/wk	light-mod exudate

*No established usual maximum, refer to Medicare Utilization Guidelines.

HCPCS	Long Description	Frequency of Change	Wound Condition
A6239	Hydrocolloid dressing, wound cover, pad size more than 48 sq in, with any size adhesive border, each dressing	3/wk	light-mod exudate
A6240	Hydrocolloid dressing, wound filler, paste, per fluid ounce	3/wk	light-mod exudate
A6241	Hydrocolloid dressing, wound filler, dry form, per gram	3/wk	light-mod exudate
A6242	Hydrogel dressing, wound cover, pad size 16 sq in or less, without adhesive border, each dressing	1/day	min - no exudate
A6243	Hydrogel dressing, wound cover, pad size more than 16 sq in but less than 48 sq in, without adhesive border, each dressing	1/day	min - no exudate
A6244	Hydrogel dressing, wound cover, pad size more than 48 sq in, without adhesive border, each dressing	1/day	min - no exudate
A6245	Hydrogel dressing, wound cover, pad size 16 sq in or less, with any size adhesive border, each dressing	3/wk	min - no exudate
A6246	Hydrogel dressing, wound cover, pad size more than 16 sq in but less than 48 sq in, with any size adhesive border, each dressing	3/wk	min - no exudate
A6247	Hydrogel dressing, wound cover, pad size more than 48 sq in, with any size adhesive border, each dressing	3/wk	min - no exudate
A6248	Hydrogel dressing, wound filler, gel, per fluid ounce	1/day up to 3 oz/mo	min - no exudate
A6250	Skin sealants, protectants, moisturizers, ointments, any type, any size	*	
A6251	Specialty absorptive dressing, wound cover, pad size 16 sq in or less without adhesive border, each dressing	1/day	mod-high exudate
A6252	Specialty absorptive dressing, wound cover, pad size more than 16 sq in but less than 48 sq in, without adhesive border, each dressing	1/day	mod-high exudate
A6253	Specialty absorptive dressing, wound cover, more than 48 sq in, without adhesive border, each dressing	1/day	mod-high exudate
A6254	Specialty absorptive dressing, wound cover, pad size 16 sq in or less with any size adhesive border, each dressing	every other day	mod-high exudate
A6255	Specialty absorptive dressing, wound cover, pad size more than 16 sq in but less than 48 sq in, with any size adhesive border, each dressing	every other day	mod-high exudate
A6256	Specialty absorptive dressing, wound cover, more than 48 sq in, with any size adhesive border, each dressing	every other day	mod-high exudate
A6257	Transparent film, 16 sq in or less, each dressing	3/wk	min exudate
A6258	Transparent film, more than 16 sq in but less than or equal to 48 sq in, each dressing	3/wk	min exudate
A6259	Transparent film more than 48 sq in, each dressing	3/wk	min exudate

*No established usual maximum, refer to Medicare Utilization Guidelines.

Medicare Utilization

HCPCS	Long Description	Frequency of Change	Wound Condition
A6260	Wound cleanser, any type, any size	*	
A6261	Wound filler, gel/paste, per fluid ounce, not elsewhere classified	1/day	
A6262	Wound filler, dry form, per gram, not elsewhere classified	1/day	
A6266	Gauze, impregnated, other than water, normal saline, or zinc paste, any width, per linear yard	1/day	
A6402	Gauze, non-impregnated, sterile, pad size 16 sq in or less, without adhesive border, each dressing	3/day	
A6403	Gauze, non-impregnated, sterile, pad size more than 16 sq in but less than 48 sq in, without adhesive border, each dressing	3/day	
A6204	Gauze, non-impregnated, sterile, pad size more than 48 sq in, without adhesive border, each dressing	3/day	
A6407	Packing strips, non-impregnated, up to 2 inches in width, per linear yard	3/day	
A6410	Eye pad, sterile, each	*	
A6411	Eye pad, non-sterile, each	*	
A6412	Eye patch, occlusive, each	*	
A6413	Adhesive bandage, first-aid type, any size each	*	
A6441	Padding bandage, non-elastic, non-woven/non-knitted, width greater than or equal to three inches and less than five inches per yard	same as ds chg freq	
A6442	Conforming bandage, non-elastic, knitted/woven, non-sterile, width less than three inches, per yard	same as ds chg freq	
A6443	Conforming bandage, non-elastic, knitted/woven, non-sterile, width greater than or equal to three inches and less than five inches, per yard	same as ds chg freq	
A6444	Conforming bandage, non-elastic, knitted/woven, non-sterile, width greater than or equal to five inches, per yard	same as ds chg freq	
A6445	Conforming bandage, non-elastic, knitted/woven, sterile, width less than three inches, per yard	same as ds chg freq	
A6446	Conforming bandage, non-elastic, knitted/woven, sterile, width greater than three inches and less than five inches, per yard	same as ds chg freq	
A6447	Conforming bandage, non-elastic, knitted/woven, sterile, width greater than or equal to five inches, per yard	same as ds chg freq	
A6448	Light compression bandage, elastic, knitted/woven, width less than three inches, per yard	1/wk	
A6449	Light compression bandage, elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard	1/wk	
A6450	Light compression bandage, elastic, knitted/woven, width greater than or equal to five inches, per yard	1/wk	

*No established usual maximum, refer to Medicare Utilization Guidelines.

HPCPS	Long Description	Frequency of Change	Wound Condition
A6451	Moderate compression bandage, elastic, knitted/woven, load resistance of 1.25 to 1.34 foot pounds at 50% maximum stretch, width greater than or equal to three inches and less than five inches, per yard	1/wk	
A6452	High compression bandage, elastic, knitted/woven, load resistance greater than or equal to 1.35 foot pounds at 50% maximum stretch, width greater than or equal to three inches and less than five inches, per yard	1/wk	
A6453	Self-adherent bandage, elastic, non-knitted/non-woven, width less than three inches, per yard	1/wk	
A6454	Self-adherent bandage, elastic, non-knitted/non-woven, width greater than or equal to three inches and less than five inches, per yard	1/wk	
A6455	Self-adherent bandage, elastic, non-knitted/non-woven, width greater than or equal to five inches, per yard	1/wk	
A6456	Zinc paste impregnated bandage, non-elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard	1/wk	
A6457	Tubular dressing with or without elastic, any width, per linear yard	*	
A6501	Compression burn garment, bodysuit (head to foot), customer fabricated	*	
A6502	Compression burn garment, chin strap, customer fabricated	*	
A6503	Compression burn garment, facial hood, custom fabricated	*	
A6504	Compression burn garment, glove to wrist, custom fabricated	*	
A6505	Compression burn garment, glove to elbow, custom fabricated	*	
A6506	Compression burn garment, glove to axilla, custom fabricated	*	
A6507	Compression burn garment, foot to knee length, custom fabricated	*	
A6508	Compression burn garment, foot to thigh length, custom fabricated	*	
A6509	Compression burn garment, upper trunk to waist including arm openings (vest), custom fabricated		
A6510	Compression burn garment, trunk, including arms down to leg openings (leotard), custom fabricated	*	
A6511	Compression burn garment, lower trunk including leg openings (panty), custom fabricated	*	
A6512	Compression burn garment, not otherwise classified	*	
A6530	Gradient compression stocking, below knee, 18-30 mm HG, each	*	open venous ulcer

*No established usual maximum, refer to Medicare Utilization Guidelines.

Medicare Utilization

HPCS	Long Description	Frequency of Change	Wound Condition
A6531	Gradient compression stocking, below knee, 30-40 mmHG, each	*	open venous ulcer
A6532	Gradient compression stocking, below knee, 40-50 mmHG, each	*	open venous ulcer
A6533	Gradient compression stocking, thigh length, 18-30 mmHG, each	*	open venous ulcer
A6534	Gradient compression stocking, thigh length, 30-40 mmHG, each	*	open venous ulcer
A6535	Gradient compression stocking, thigh length, 40-50 mmHG, each	*	open venous ulcer
A6536	Gradient compression stocking, full length/chap style, 18-30 mmHG, each	*	open venous ulcer
A6537	Gradient compression stocking, full length/chap style, 30-40 mmHG, each	*	open venous ulcer
A6538	Gradient compression stocking, full length/chap style, 40-50 mmHG, each		open venous ulcer
A6539	Gradient compression stocking, waist length, 18-30 mmHG, each	*	open venous ulcer
A6540	Gradient compression stocking, waist length, 30-40 mmHG, each	*	open venous ulcer
A6541	Gradient compression stocking, waist length, 40-50 mmHG, each	*	open venous ulcer
A6542	Gradient compression stocking, custom made	*	open venous ulcer
A6543	Gradient compression stocking, lymphedema*	*	open venous ulcer
A6544	Gradient compression stocking, garter belt	*	open venous ulcer
A6549	Gradient compression stocking, not otherwise specified	*	open venous ulcer

*No established usual maximum, refer to Medicare Utilization Guidelines.

Restore Wound Dressings with TRIACT Technology

TRIACT Technology is an innovative formulation in *select* Restore wound dressings. The unique composition of TRIACT Technology provides a superior environment for moist healing of chronic wounds, significantly reduces pain with dressing changes, and promotes easy dressing application and removal. Dressings with TRIACT Technology are designated with this symbol on the packaging.



Restore Contact Layer Dressing with TRIACT Technology: Sterile



- ▶ Non-adhesive, non-occlusive wound contact dressing
- ▶ Indicated for low to moderate exuding partial- and full-thickness wounds
- ▶ Ideal to use on wounds with fragile surrounding skin
- ▶ Apply directly to the wound and cover with a secondary dressing

Stock No	HCPCS	Description	Quantity/Box
509338	A6207	4" x 5"	10
509339	A6207	6" x 8"	10

Restore Contact Layer Dressing with Silver and TRIACT Technology: Sterile



Silver

- ▶ Non-adhesive, non-occlusive antimicrobial wound contact dressing
- ▶ May help to reduce infection in low to moderately exuding partial- and full-thickness wounds
- ▶ Shown to be effective against bacteria most frequently associated with wound infections
- ▶ Apply directly to the wound and cover with a secondary dressing
- ▶ Contains silver sulfate

Stock No	HCPCS	Description	Quantity/Box
509341	A6207	4" x 5"	10
509342	A6207	6" x 8"	10

Restore Adhesive Foam Dressing with TRIACT Technology: Sterile



- ▶ Semi-permeable, absorbent dressing with adhesive border
- ▶ Manages moderate to heavily exuding chronic and acute wounds
- ▶ Super-absorbent foam pad ensures drainage of exudates and helps protect the skin around the lesion from maceration
- ▶ Soft, semi-permeable backing

Stock No	HCPCS	Description	Quantity/Box
509347	A6212	4" x 4" (1.5" x 1.5" foam pad)	10
509348	A6212	6" x 6" (4" x 4" foam pad)	10
509349	A6213	6" x 8" (3.5" x 5.6" foam pad)	10

Restore Non-Adhesive Foam Dressing with TRIACT Technology: Sterile



- ▶ Non-adhesive absorbent dressing
- ▶ Indicated for the treatment of all types of moderate to heavily exuding chronic and acute wounds
- ▶ Super-absorbent foam pad ensures drainage of exudates and helps protect the skin around the lesion from maceration
- ▶ Soft, semi-permeable backing

Stock No	HCPCS	Description	Quantity/Box
509343	A6209	4" x 4"	10
509344	A6210	6" x 8"	10

Restore Non-Adhesive Foam Dressing with Silver and TRIACT Technology: Sterile



Silver

- ▶ Non-adhesive, non-occlusive antimicrobial absorbent dressing
- ▶ May help to reduce infection in moderately to high exuding partial- and full-thickness wounds
- ▶ Super-absorbent foam pad ensures drainage of exudates and helps protect the skin around the lesion from any maceration
- ▶ Soft, semi-permeable backing
- ▶ Contains silver sulfate

Stock No	HCPCS	Description	Quantity/Box
509345	A6209	4" x 4"	10
509346	A6210	6" x 8"	10

Restore Wound Dressings

Restore Calcium Alginate Dressing: Sterile



529938/529937/529939/529940

- ▶ Highly absorptive
- ▶ Made from calcium sodium alginate, creating conformable protective gel when in contact with exudate
- ▶ Forms moist wound interface
- ▶ Remains intact when saturated so it is removed in one piece

Stock No	HCPCS	Description	Quantity/Box
529938	A6196	2" x 2"	10
529937	A6196	4" x 4"	10
529939	A6197	4" x 8"	5
529940	A6199	12" rope	5

Restore Calcium Alginate Dressing Silver: Sterile



529967/529968/529969

- ▶ Releases silver ions in the presence of wound fluid
- ▶ Effective antimicrobial agent against a broad spectrum of microorganisms
- ▶ Indicated for moderate to heavily exuding partial- to full-thickness wounds
- ▶ Assists in maintaining a moist environment and allows intact removal
- ▶ Contains silver sodium hydrogen zirconium phosphate



Stock No	HCPCS	Description	Quantity/Box
529967	A6196	2" x 2"	10
529968	A6197	4" x 4.75"	10
529969	A6199	1" x 12"	5

Restore Hydrogel Dressing



529974/529972/529973

- ▶ Maintains moist healing environment in partial- and full-thickness wounds
- ▶ Clear, viscous gel
- ▶ Up to 72-hour wear time
- ▶ Available in three forms

Stock No	HCPCS	Description	Quantity/Box
529974	A6248	Amorphous gel in tube 3 oz.	12
529972	A6231	Impregnated gauze sponge 4" x 4" - sterile	15
529973	A6266	Impregnated gauze strip 2" x 3.5 yd. - sterile	12

Restore Products Have a New Look!

Look for the Hollister Wound Care
Wave and/or Logo on
Restore products.



Restore Hydrocolloid Dressing: Sterile



51995x/51996x

- ▶ Conformable occlusive dressing with flexible outer layer
- ▶ Maintains moist wound environment
- ▶ Manages minimal to moderate exudate in partial- and full-thickness wounds
- ▶ Available with or without tapered edges, specialty shapes
- ▶ Includes disposable wound measuring guide

Stock No	HCPCS	Description	Quantity/Box
519953	A6234	Without tapered edges 4" x 4"	5
519954	A6235	Without tapered edges 6" x 8"	3
519955	A6236	Without tapered edges 8" x 8"	3
519956	A6234	With tapered edges 4" x 4"	5
519963	A6235	With tapered edges 6" x 6"	5
519957	A6235	With tapered edges 6" x 8"	3
519958	A6236	With tapered edges 8" x 8"	3
519959	A6235	With tapered edges/triangle shaped 17 sq. in.	5
519965	A6235	With tapered edges/triangle shaped 26.5 sq. in.	5

Restore Extra Thin Hydrocolloid Dressing: Sterile



519921/519923/519925

- ▶ Thinner occlusive dressing with flexible backing
- ▶ Maintains moist wound environment
- ▶ Manages minimal exudate in shallow wounds
- ▶ Protects skin from friction injury
- ▶ Includes disposable wound measuring guide

Stock No	HCPCS	Description	Quantity/Box
519921	A6234	4" x 4"	5
519923	A6235	6" x 8"	3
519925	A6236	8" x 8"	3

Restore Hydrocolloid Dressing with Foam Backing: Sterile



519930/519932/519935

- ▶ Occlusive dressing with white foam backing
- ▶ For low friction areas with moderate exudate
- ▶ Includes disposable wound measuring guide

Stock No	HCPCS	Description	Quantity/Box
519930	A6234	4" x 4"	5
519932	A6235	6" x 8"	3
519935	A6236	8" x 8"	3

A Quick Guide to Restore Silver Packaging:



Restore Contact Layer and Foam Dressings with Silver have two-sided foil packaging. All other Restore products with TRIACT Technology have one clear side and one foil side.

Restore Wound Dressings & Wound Cleanser

Restore Odor-Absorbent Dressing: Sterile



519904/519906

- ▶ Foam matrix dressing covered with non-woven fabric for patients with malodorous wounds resulting from necrosis, infection, or bacterial contamination
- ▶ Activated carbon helps to neutralize offensive odors
- ▶ Use as primary or secondary dressing

Stock No	HCPCS	Description	Quantity/Box
519904	A6209	4" x 4"	10
519906	A6211	6" x 10"	10

Restore Wound Cleanser



529975/529976

- ▶ Helps remove particulate matter and other debris from wound bed
- ▶ No-rinse alternative to saline and harsh antiseptic cleansers

Stock No	HCPCS	Description	Quantity/Box
529975	A6260	8 oz. pump spray	12
529976	A6260	12 oz. pump spray	12

Disposable Wound Guides



Disposable Wound Measuring Guides are included with all Restore Hydrocolloid Dressings. To order Wound Measuring Guides, please see page 135.

Skin Care

Restore Skin Cleanser



517210

- ▶ For use on intact skin
- ▶ Cleanses peristomal and perianal skin of urinary and fecal discharge
- ▶ Gentle, non-irritating
- ▶ Must be rinsed

Stock No	HCPCS	Description	Quantity/Box
517210	A9270	8 oz. (237 ml) pump spray	12

Restore Cleanser & Moisturizer



529977/529978

- ▶ Effective skin protection for people with urinary and/or fecal incontinence
- ▶ Cleanser, moisturizer, protective breathable barrier for skin
- ▶ Dimethicone-based
- ▶ No rinse

Stock No	HCPCS	Description	Quantity/Box
529977	A6250	7.5 oz. (222 ml) pump spray	12
529978	A6250	11.5 oz. (340 ml) pump spray	12

Restore DimethiCreme Skin Protectant



529979

- ▶ Dimethicone-based protective breathable barrier
- ▶ Use on skin or mucous membrane surfaces exposed to harmful stimuli
- ▶ Moisturizes and protects
- ▶ Not for use under adhesive products

Stock No	HCPCS	Description	Quantity/Box
529979	A6250	4 oz. (118 ml) tube	12

Restore Moisture Barrier Skin Ointment



527230

- ▶ Helps protect and soothe irritated skin
- ▶ For pediatric and geriatric use
- ▶ Contains vitamins A, D, and E
- ▶ Petrolatum-based
- ▶ Not for use under adhesive products

Stock No	HCPCS	Description	Quantity/Box
527230	A6250	2.5 oz. (75 ml) tube	12

Restore Skin Conditioning Creme



517220

- ▶ Moisturizes and soothes dry, flaky skin
- ▶ May be used under adhesive products

Stock No	HCPCS	Description	Quantity/Box
517220	A6250	4 oz. (120 ml) bottle	12

Glossary

The following is a list of common terms which are used in wound care.

Abrasion: Wearing away of the skin through some mechanical process (friction or trauma).

Abscess: Accumulation of pus formed in tissue as a result of infection.

Alginate: A highly absorptive dressing derived from brown seaweed.

Cellulitis: Inflammation of the tissues indicating a local infection; characterized by redness, edema and tenderness.

Collagen: Main supportive protein of the skin and connective tissue.

Debridement: Removal of foreign material and devitalized or contaminated tissue from a wound.

Dehiscence: Separation of wound edges.

Denude: Removal or loss of superficial skin layers.

Edema: Swelling

Epidermis: Outermost layer of the skin.

Erythema: Diffuse redness of the skin.

Eschar: Thick, leathery black crust; it is nonviable tissue and is colonized with bacteria.

Excoriation: Linear scratches on the skin.

Exudate: Wound fluid or drainage.

Friction: Rubbing that causes mechanical trauma to the skin.

Full-thickness: Tissue destruction extending through the dermis to involve subcutaneous level and possibly muscle, fascia or bone.

Granulation: Formation of connective tissue and many new capillaries in a full-thickness wound; typically appears as red and cobblestoned.

Hydrocolloid dressing: A category of wound dressings composed of materials, such as gelatin, pectin and carboxymethylcellulose, that provide a moist healing environment and adhere to the skin around the wound.

Hydrogel: Water- or glycerin-based gels, impregnated gauzes or sheet dressings. Hydrogels maintain a moist healing environment and absorb a minimal amount of wound exudate.

Hydrophilic: Attracting moisture.

Infection: Overgrowth of microorganisms in sufficient quantities to overwhelm the body's defenses.

Maceration: Softening of tissue by soaking in fluids.

Necrotic: Devitalized tissue; may appear yellow and moist, gray, or dark and leathery.

Partial-thickness: Wounds that extend through the epidermis and may involve the dermis; these wounds heal by re-epithelialization.

Peri-wound: The area immediately around the wound.

Pus: Thick fluid composed of leukocytes, bacteria, and cellular debris.

Shear: Sliding of skin over subcutaneous tissues and bones obstructing cutaneous capillaries, which may lead to ischemia.

Pressure Ulcer Stages:

Suspected Deep Tissue Injury: 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.



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 (a heralding sign of risk).

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 blister.



Presents as a shiny or dry shallow ulcer without slough or bruising. *This stage should not be used to describe skin tears, tape burns, perineal dermatitis, maceration or excoriation. *Bruising indicates suspected 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 malleolus do not have subcutaneous tissue and stage III ulcers can be shallow. In contrast, areas of significant adiposity can develop extremely deep stage III pressure ulcers. Bone/tendons is not visible or directly palpable.

Stage IV: Full-thickness tissue loss with exposed bone, tendon or muscle. Slough or eschar may be present on some parts of the wound bed. Often include undermining and tunneling.



The depth of a stage IV pressure ulcer varies by anatomical location. The bridge of the nose, ear, occiput and malleolus do not have 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 possible. Exposed bone/tendon is visible or directly palpable.

Pressure Ulcer Stages (continued):



Unstageable Pressure Ulcer: Full-thickness tissue loss in which the base of the ulcer is covered by slough (yellow, tan, gray, green or brown) and/or eschar (tan, brown or black) in the wound bed.

Further Description: Until enough slough and/or eschar is removed to expose the base of the wound, the true depth, and therefore stage, cannot be determined. 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.

Sinus Tract: A course or pathway which can extend in any direction from the wound base; results in dead space with potential for abscess formation.

Slough: Stringy, necrotic tissue; usually yellow, tan, gray, green or brown.

Strip: Removal of epidermis by mechanical means, usually tape.

Ulcer: Loss of epidermis/dermis or mucous membrane with definite margins.

Undermine: Skin edges of a wound that have lost supporting tissue under intact skin.

Wound: A break in the integrity of the skin; an injury to the body which causes a disruption of the normal continuity of the body structures.

Wound Margin: Rim or border of a wound.

Skin Structure:

The **epidermis**, which is the outermost layer of the skin, is characterized as follows: avascular, varies in thickness (depending on body location), a dry structure which sheds cells and replaces itself every 4 to 6 weeks; approximately the thickness of a piece of plastic wrap.

The **dermis** is located directly beneath the epidermis and is characterized as follows: provides strength and structural support through a vascular network of connective tissue blood vessels, nerves, hair and nails. Sebaceous glands and sweat glands originate from this layer which is thicker than the epidermis.

Below the dermis is the **subcutaneous tissue** which is composed of major vessels, lymphatics, fat and connective tissue. This area provides insulation and nutritional support for the skin. Located below the subcutaneous tissue are fascia, muscles, tendons and bone. The thickness of the dermis and subcutaneous layers vary from person to person and on different parts of the body.

Types of Ulcers:

Pressure Ulcers: A pressure ulcer is 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.

Venous Ulcers: These are the most common type of lower-leg ulcers in ambulatory people. The underlying cause involves vein damage or an incompetent calf muscle pump action which leads to venous hypertension. As a result, the blood pools in the lower extremities causing edema and leakage of fibrinogen and other blood products into the tissues. Trauma to the area or increased pressure within the tissues results in ulceration.

Arterial Ulcers: Arterial ulcers result from chronic or acute arterial insufficiency to the skin and subcutaneous tissue of the lower extremities. The most common cause is a progressive disease: atherosclerosis. The precipitating event leading to ulceration is usually trauma, such as a bumped toe or tight shoes. Arterial ulcers may occur alone or in combination with diabetes, venous stasis and numerous other conditions. Multidisciplinary management of these patients with early intervention and close monitoring is key to prevention of more serious complications.

Neuropathic Ulcers: Neuropathic ulcers may occur in individuals with diabetes, spinal cord injury, Hansen's Disease, or other conditions that result in loss of sensation in the legs and feet. Diabetic foot ulcers are most commonly caused by peripheral neuropathy and peripheral vascular disease. Multidisciplinary management of these patients with early intervention and close monitoring is key to prevention of more serious complications.

Educational Resources

Educational
Resources

All of these Hollister educational materials listed and others are available on our website: www.hollisterwoundcare.com

Clinical Posters:

Restore Contact Layer Dressings with TRIACT Technology Literature No

Using a Novel Contact Layer for the Management of Epidermolysis Bullosa Skin Lesions	907990
Assessment of a New Contact Layer in the Local Management of Pediatric Wounds: Results of a European Clinical Study	907984
Use of Negative Pressure Wound Therapy with a New Wound Contact Layer: Results of a Clinical Evaluation	907982
Use of a Novel Contact Layer in Wound Care	907978
Clinical Evaluation of a New Contact Layer Dressing for the Local Management of Acute and Chronic Wounds	909916
The Role of "Touch" in the Assessment of New Wound Care Dressings	909918

Restore Foam Dressings with TRIACT Technology Literature No

Leg Ulcers and a New Foam Dressing: Results of Two French Multicenter Clinical Studies	907986
Use of a Novel Foam Dressing with Non-Adherent Contact Layer in Leg Ulcer Management	907980
Clinical Evaluation of a New Foam Dressing With and Without Adhesive for the Local Management of Acute and Chronic Wounds	909915
Clinical Trial of a New Foam Dressing for the Local Management of 10 Donor Sites	909917

Restore Foam Dressings Silver, Non-Adhesive with TRIACT Technology Literature No

Critical Colonization and a New Absorbent Dressing Impregnated with Silver Salts: Results of a Clinical Study in the Management of Leg Ulcers	907992
---	--------

Other Educational Resources Literature No

Wound Measuring Guide – 6" Ruler	908892
Small Wound Tracer	874366
Large Wound Tracer	874367

Specialty Organizations

DeBRA of America, Inc.
www.debra.org
1.866.332.7276

The Association for the Advancement of Wound Care (AAWC)
www.aawconline.org
1.866.229.9999

Wound, Ostomy, Continence Nurses Society (WOCN)
www.wocn.org
1.888.224.9626

American Academy of Wound Management (AAWM)
www.aawm.org
202.521.0368

Specialty Organizations (continued)

American Burn Association

www.ameriburn.org

312.642.9260

Wound Healing Society

www.woundheal.org

763.765.2377

National Pressure Ulcer Advisory Panel

www.npuap.org

202.521.6789

American Diabetes Association

www.diabetes.org

1.800.DIABETES (342.2383.)

National Spinal Cord Injury Association

www.spinalcord.org

1.800.962.9629

U.S. Department of Health and Human Services

Centers for Medicare & Medicaid Services

www.cms.hhs.gov

National Guideline Clearinghouse

www.guideline.gov

European Wound Management Association

www.ewma.org

+45 70 20 03 05
