

Application and Cutting Guide



Always remember to wash your hands before and after the application of a dressing.

Please use your recommended dressing technique according to infection control guidelines.

Disclaimer: These are general guidelines. Please check local treatment recommendations applicable in your region or healthcare institution.

Washing hands



Ears



Use a thin hydrocolloid (5 x 7 cm), cut into a strip, fold in half lengthways, then cut a 'fringe' along one edge (the cuts should be approximately 0.5 cm apart). Apply the uncut edge of the dressing first, and use the cut edges to fold around the shape of the ear. If the wound is wet, use a small piece of alginate underneath.



Ears



For wounds caused in the area where oxygen tubing or foam rubs on the ears, cut half way into a thin hydrocolloid (the piece should be approx 2 x 3 cm), anchor to the flat of the head with the uncut half, and then put the other two sections around the ear. These can also be adapted for the nasal region.



Ears



Use a non-adhesive or a Soft-Hold dressing for this kind of wound. Cut the dressing in order to fit the size of the ear. Choose a suitable secondary dressing to keep the dressing in place.



Elbows



Cut two small slits in the dressing and apply it. Mould the slit around the elbow. Remember to apply the dressing with the patient bending the arm in a 90° angle.



Elbows



Use 3 strips of thin hydrocolloid. With the joints at an angle of 90°, apply the first strip directly over the angle of the joint. Apply the second strip overlapping one edge approximately 30° to the first strip. Apply the third strip over the other edge of the first strip in the same way. Cup the dressing firmly to mould the shape of the joint. If the wound is wet, a foam dressing is more suitable.



Bunion



Use for the hallux toe and for inter-digital ulcers. Secure with a secondary dressing.



Toes



Cut a dressing and use it for interdigital wounds. The dressing must be secured with a secondary dressing.



Toes



Use for the tip of the toes and for inter-digital ulcers. Secure with tubular gauze.



Toes



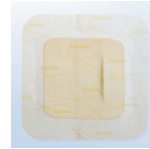
Cut a "bow-tie" shaped, thin hydrocolloid dressing. Use the slimmest dressing possible considering footwear. Often a non-adhesive dressing with separate fixation will work better than an adhesive dressing due to the pressures applied to the feet while walking.



Toes



For wet wounds, use a foam dressing. Additional fixation is required.



Hands



For margin of hand, cut one slit towards the edge of the dressing. Apply over the first or fifth digit (as appropriate). To anchor the dressing mould the remaining dressing to the hand. Where there is fungal infection present, a silver-containing foam dressing is appropriate.



Fingers



For wounds between the fingers, cut a dressing and slide onto the finger. Use a secondary dressing to secure the foam dressing.



Fingers



For small wounds on and between fingers, a thin hydrocolloid dressing can easily be cut into small strips to fit the wound.



Fingers



For multiple digits.



Heels



There are a variety of different heel dressings available. Consider which of these shapes is best for your patient.



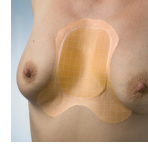
Axilla



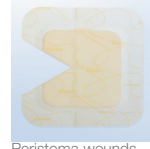
A heel dressing may be a good solution for dressing the axilla area. Keep the direction of fluid in mind and apply the largest part of the dressing as illustrated in the photo.



Sternum



Particularly suitable for women. Cut according to the size of breast.



Peristoma wounds



When the wound is close to an ostomy, care needs to be taken when deciding whether to apply the stoma base plate on top or underneath the dressing.



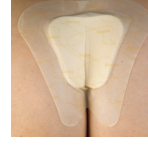
Sacral



Bottoms are considerable in size shape and skin texture. General principles for management include using the slimmest dressing possible. There are a variety of different sacral dressings available. Consider which of these shapes is best for your patient's bottom. Please ensure that you differentiate between pressure ulcers and moisture lesions, as the supporting management differs greatly.



Sacral



If the wound is wet, use a foam and/or an alginate dressing (the alginate dressing requires a secondary dressing).