NHS
Suffolk and
North East Essex

Suffolk & North East Essex Wound Care Formulary

Final Version 1.0 – DEC 2024

Produced by the SNEE Medicines Optimisation Teams – Final Version 1.0, December 2024. Review Date December 2025 by SNEE Integrated Medicines Optimisation Sub-Committee (IMOC)

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Purpose and Scope

This formulary has been developed to support healthcare professionals who prescribe, or order/request dressings for patients that require wound care treatment within Suffolk and North East Essex primary care settings.

Products List

The wound care products listed within this document have been selected for inclusion following evaluation, in collaboration with our specialist stakeholder professionals. The product list should be sufficient to cover the majority of patients' needs. Where standard formulary products are found to be inappropriate, or the patient may require a highly specialist treatment advice should be sought from the relevant NHS wound care specialist (see contact page for examples of specialists) The specialist can recommend or approve requests for advanced wound care dressings that are restricted on formulary.

The formulary will be reviewed annually by a panel of local wound care specialists, however the products listed may change at any time following a product review or where disruptions to stock availability occur. The most up to date version will be accessible via SNEE ICB website.

Stakeholders

This formulary has been prepared by Suffolk and North East Essex ICB Medicines Optimisation Appliance Nurse Team in collaboration with Precurement and Wound care specialists across Suffolk and North East Essex:

NHS East Suffolk and North East Essex Foundation Trust
NHS SNEE ICB Medicines Optimisation Appliance Nurse Team
NHS West Suffolk Foundation Trust

How to use the Formulary

The formulary has been developed as a SNEE wide document to include all clinical settings in both Suffolk and North East Essex Localities.

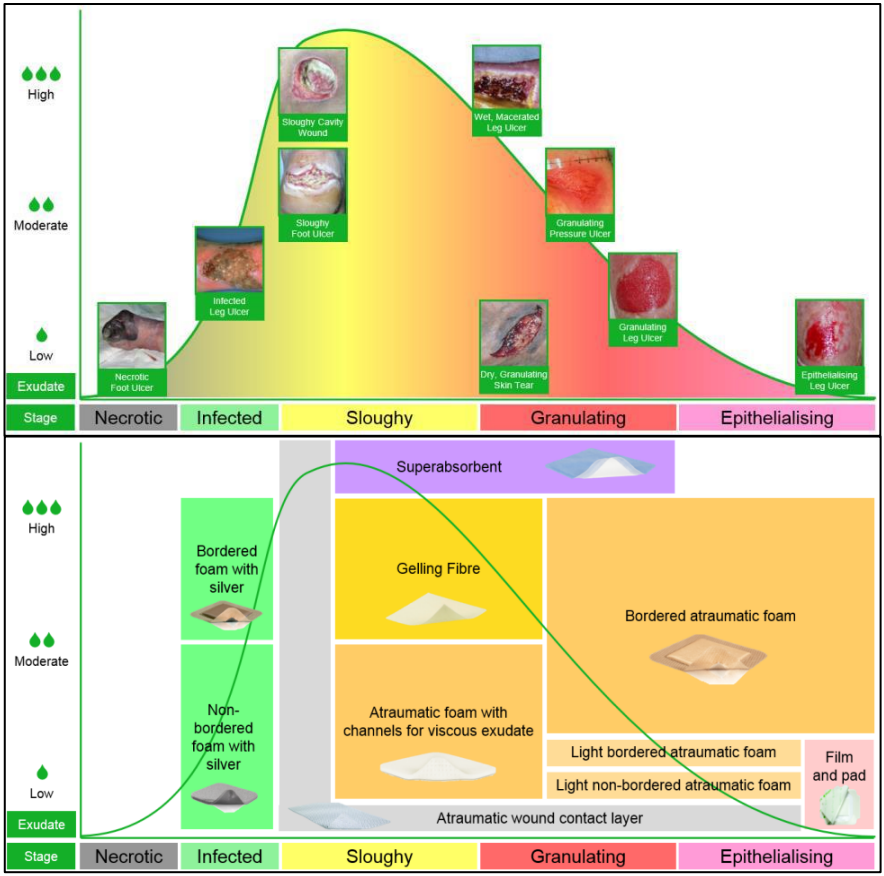
Products with RED highlighted sections or table margin represents specialist use/recommendation only

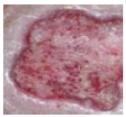
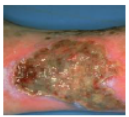
Please note: the level of access of dressing types on the product list will vary depending on the location and setting. Each product with a restriction will be highlighted with a colour or note to guide the reader. Local ordering systems (i.e. ONPOS/NHS Supply Chain) will list all accessible and current products that are available to order for that setting. The product listing spreadsheet can be accessed for a breakdown of each setting. Each dressing type will include information on how to use the products.

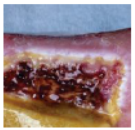
Wound Healing Continuum

Wounds healing by secondary intention should progress along the wound healing continuum from left to right. Treatment will change along the continuum, from high intervention - debridement of necrotic wounds, to low intervention – minimising disturbance of epithelialising tissue. Similarly, appropriate dressings will progress from the complex dressings capable of handling large amounts of exudate, to simpler dressings.

The dressing categories below are broad recommendations only and not a replacement for clinical judgement. Infected wounds may require an antimicrobial dressing. In addition, local protocols for infected wounds should be followed. Contact layers, such as silicone based dressings may be suitable for a wider variety of wounds, depending on the secondary dressing or if used with negative pressure devices.



Wound Type		Treatment Aim	Dressing options
	Necrotic	Debride by rehydrating and loosening eschar by autolysis, except wounds in diabetics, severe PAD or end of life care	Hydrogels - **excluding Ischaemic feet** Hydrocolloid, Film, Light Foam
	Dry	Rehydrate to create a moist wound healing environment	Hydrogel, Hydrocolloid, Film, Light Foam
	Infected	Identify infection, reduce bacterial load and debride slough, control odour	Antimicrobial dressing, Antimicrobial wound cleansing solution
	Fungating or Malodorous	Reduce odour and manage exudate	Antimicrobial dressing, Antimicrobial wound cleansing solution
	Cavity	Remove slough, ideally by autolytic debridement and absorption, or physical debridement if necessary	Alginate, Gelling Fibre, Negative Pressure Wound Therapy

Wound Type		Treatment Aim	Dressing Options
	Sloughy	Remove slough, ideally by autolytic debridement and absorption, or physical debridement if necessary	Hydrogel, Gelling fiber, Foam for viscous exudate
	Macerated	Seal the edge of the wound bed from moisture and ensure excess exudate is managed	Gelling fiber, Foam for higher exudate levels, Foam that can seal the edge of the wound bed
	Granulating	Maintain a moist enviroment and protect delicate tissue	Foam, Atraumatic Foam, Wound Contact Layer, Atraumatic Wound Contact Layer
	Epithelialising	Maintain a moist enviroment and protect delicate tissue	Foam, Atraumatic Foam, Wound Contact Layer, Atraumatic Wound Contact Layer, Film & Pad
	Damaged peri-wound skin	Protect against further damage, restore barrier function as rapidly as possible.	Barrier Products, Atraumatic Foam, Atraumatic Wound Contact Layer, Emollients

Item	Size	Indications	Contraindications	Comments

Wound Management Products: Skin Preparations and Consumables

Consumables				
Wound Dressing Packs (Nurse-it / Softdrape)	Small/ Medium or Large *nitrile gloves*	Dressing packs are for use by the healthcare provider these are not to be sourced via prescription. Where patients are self-caring, if dressing packs are required these should be provided by the service overseeing the care		
MASD Skin Preparations and Barrier Products – Refer to Skin Care Algorithm				
Acute Settings – NEE/ESNEFT Only – not to be used in the community or primary care				
Contiplan Barrier Wipes (Clinell)	Per Pack	Protection from urine and faeces associated with incontinence.	For external use only. Do not use on patients with a known allergy to dimethicone. Do not use with adhesives or appliances.	Do not use on injuries greater than partial-thickness wounds.
Derma Protective Plus Skin Protectant (Ennogen)	115g			
Community/Primary Care - Mild to Moderate Damage				
Medi Derma S Barrier Cream (Medicareplus)	90g Tube	Prevention and protection of intact and mildly damaged skin from incontinence, wound exudate and/or irritation from adhesive products	Do not use on infected areas of skin. Do not use if there are any signs of irritation and consult your clinician accordingly.	Only use as directed. For external use only.
Medi Derma-S Barrier Film (Medicareplus)	Aerosol Spray 50 1ml Applicator	Prevention and protection of intact and moderately-damaged skin from moisture		
Community/Primary care - Severe Damage / Restrictions to use				
Medi Derma Pro Ointment (Medicareplus)	115g	For use on severe damaged skin from faecal or urinary incontinence.	For external use only. Do not use if there are any signs of irritation or known allergies/sensitivities to any of the	Can be used underneath incontinence pads as it does not block pad absorption.

Item	Size	Indications	Contraindications	Comments
Medi Derma Pro Foam Cleanser (Medicareplus)	250ml	For use in combination with Medi Derma-Pro ointment. Short term use only. Refer to ICB pathway.	ingredients. Only use as directed. Do not use with adhesive dressings or appliances.	Should be used in conjunction with Medi derma Ointment - Not to be used separately or used long term.
Advanced Preparations - Restricted or Specialist/TVN Only – depending on setting				
MediHoney Barrier Cream (Integra)	50g	Treatment of incontinence-associated dermatitis and atopic eczema.	Patch test before first use	**Only use short term where fungal infection is present.**
Cavilon Advanced (Solventum) *Liquid Dressing* **Specialist only**	0.7ml 2.7ml	Protection of intact or damaged skin from bodily fluids. Prevention and reversal of all forms of moisture associated skin damage.	Do not use on full-thickness wounds, around the eyes or on infected skin.	Extremely flammable until completely dried on the skin.
Peri-Wound Protection				
Barrier Film				
Medi Derma-S Non-Sting (Medicareplus) Barrier Film	1ml applicator (Pack of 5) 50ml can	Prevention and protection of intact and mildly-damaged skin from wound exudate and/or irritation from adhesive products	Do not use on infected areas of skin. Do not use if there are any signs of irritation Only use as directed. For external use only.	1ml swab covers 15cmx15cm Reapply at each dressing change For intact or damaged skin
Medi Derma-S (Medicareplus)	3ml applicator	**Specialist only**	Not required as standard	
Adhesive Remover Spray				
Lifteez Non-Sting Medical (Medicareplus) Adhesive Remover *Alcohol Free*	50ml Aerosol	Effective removal of ostomy pouches, medical adhesive devices and dressings. Suitable for adult and paediatric use.	Do not use on infected areas of skin or if any irritation occurs. Avoid use on delicate or sensitive areas of skin. Only use as directed.	Minimises skin stripping and pain at dressing removal For use when removing adhesive dressings only

Item	Size	Indications	Contraindications	Comments
Heel Balms				
Restricted or Specialist/TVN Only – depending on setting				
Flexitol *Heel Balm* **(Thornton & Ross)** **Specialist only**	One Tube	For the symptomatic treatment of foot anhidrosis. Medically proven to provide relief from dry, cracked skin on the heels and feet.	Allergy to any of the ingredients	
Dermatonics Once Heel Balm **Primary Care Only**	75ml tube	Please follow pathway	Please follow pathway	Only needs to be applied once a day
Saline				
Irripod *Sterile water for irrigation*	25 x 20ml ***Sodium Chloride 0.9%***			Tap water is preferred for leg ulcers and chronic wounds(not in acute settings)
Swabs				
Non-woven fabric swab *(i.e. Premier Gauze)*	10x 10cm			Do not use as a dressing

Item	Size	Indications	Contraindications	Comments

Wounds Management Products: Dressings

Non-Adherent Wound Contact Layer Dressing				***Primary dressing***
Silicone contact layer				
Profore WCL (S&N) *(Hypergranulation, alt to NA ultra)*	14cm x 20cm	Up to 7 days use	Requires a secondary dressing	Can be used for hyper granulation. Mainly for leg ulcer use
Soft polymer wound contact dressing				
Atrauman *(Hartmann)* *Polymer*	5cm x 5cm (podiatry) 7.5cmx 10cm 10cm x 20cm 20cm x 30cm	As a primary wound contact layer for a wide variety of wounds, including infected wounds	Requires a secondary dressing	Can be left in place for up to 7 days
Soft silicone wound contact dressing				
Mepitel One (Molnlycke) *Up to 14-day wear time*	6cm x 7cm 9cm x 10cm 13cm x 15cm 24cm x 27cm (**Specialist Acute ONLY**)	A wide range of exuding wounds Can also be used as a protective layer on non-exuding wounds, and with negative pressure wound therapy (NPWT) systems.	Do not use on patients with known sensitivity to the dressing or its components. Imprints can occur when used on burns treated with meshed grafts if the product is not used properly.	Can remain in place for up to **14 days**. Change secondary dressing as needed Apply tacky side to wound bed
Adaptic Digit (Solventum) *Finger and Toe Dressings*	Small 2cm Medium 2.4cm Large 2.8cm 3cm	Manages a range of mild to severe digit injuries		Includes soft silicone contact layer and outer layer in one dressing
Hydrogels				***Primary dressings***
Intrasite (S&N) *Liquid gel*	8g (1 tube)	Management of shallow and deep open wounds. Wounds healing by secondary intention including venous leg ulcers, surgical	Known sensitivity to the dressing or any of its ingredients. For details of precautions,	**Avoid use** on ischemic diabetic feet, infected and heavily exuding wounds **Donates moisture** to dry necrotic tissue

Item	Size	Indications	Contraindications	Comments
		wounds, pressure ulcers, extravasation injuries, radiation damage, burns, fistulae, amputation stumps and fungating ulcers.	contact supplier.	Requires a secondary dressing
Kerralite Cool *(Solventum)* *Non-Adhesive Gel Sheet* ***Up to 7-day use***	6cm x 6cm 8.5 x 12cm 10cmx15cm	Chronic wounds, painful wounds, and skin conditions such as leg ulcers, radiation therapy damage, skin tears, burns and scalds. May be used on low-exuding and non-exuding wounds to assist in autolytic debridement by hydration of necrotic and sloughy tissue and for absorption of exudate.	Full-thickness wounds; heavily bleeding wounds; third-degree burns; or as a covering for deep, narrow cavities or sinuses	**Avoid use** on ischemic diabetic feet, infected and heavily exuding wounds **Donates moisture** to dry necrotic tissue Requires a secondary dressing
Kerralite Cool (Solventum) Adhesive **NEE Acute ONLY**	8cm x 8cm 11cmx11cm 15cmx15cm			
Hydrocolloids				***Primary or Secondary dressings***
Dry to low exuding wounds				
Comfeel Thin Transparent (Coloplast) *Up to 7-Day Use*	5cm x 7cm 10cm x 10cm 5cm x 15cm 9cm x 14cm 15cmx 15cm	Wounds with no or low exudate.	Do not use on patients with known sensitivity to any ingredients. Refer to full instructions for use	For abrasions, lacerations and post-operative wounds. No outer dressing required. Allow overlap over wound edge – waterproof
Low to moderate exudate				
Comfeel plus (Coloplast) *Up to 7-Day Use*	10cmx 10cm 15cmx15cm 4cm x 6cm	Indicated for non to moderate exuding wounds: - chronic wounds i.e. pressure ulcers	Not to be used on exposed muscle or bone, or applied to patients who are known to be sensitive to one of the ingredients.	Select a size that extends at least 3cm beyond the wound edges. Can remain up to 7 days Waterproof dressing

Item	Size	Indications	Contraindications	Comments
	Contour 6cm x 8cm **Contour** 9cm x 11cm	- acute wounds i.e. donor sites, postoperative wounds and skin abrasions.	Refer to full instructions for use.	
Hydrocolloid Fibrous – Restrictions to use / Specialist depending on setting				
Urgoclean (Urgo) **POD S/NEE SUFFOLK**	6cm x 6cm	All non-infected sloughy wounds	Known sensitivity to any of the components of the dressing	• For exuding or sloughy wounds - Properties: Desloughing Absorption Haemostatic • Can be used under compression • Can remain in place for up to 7 days
	10cm x 10cm 10cm x20cm	All non-infected sloughy wounds	Known sensitivity to any of the components of the dressing	
Hydrocolloid Fibrous Rope				
Urgoclean Rope (Urgo)	2.5 x 40cm	All non-infected sloughy wounds	Known sensitivity to any of the components of the dressing	As above
Alginates				***Primary dressings***
Haemostatic properties				
Melgisorb Plus (Molnlycke) *Alginate fibre*	5cm x 5cm 10cmx10cm 10cmx 20cm 3cm x 45cm ***larger cavity***	Moderately to heavily exuding wounds, both infected and non-infected, such as pressure ulcers, venous and arterial ulcers, diabetic ulcers donor sites, postoperative wounds.	Do not use on dry wounds, third degree burns, surgical implantation. If infection is suspected follow local pathways.	For bleeding wounds Primary dressing; forms a viscous gel on contact with exudate; do not wet the dressing before application Cut or fold to shape of wound to avoid maceration can remain up to 7 days
Gelling Fiber Dressing				***Primary dressings***
Aquacel Extra (Convatec) *Hydrofiber* *(Replacing Exufiber*	5cm x 5cm 10x10cm 15x15cm	For the management of: leg ulcers, pressure ulcers (categories II–IV), diabetic ulcers, surgical wounds,	Should not be used on individuals who are sensitive to or who have had an allergic reaction	For medium and heavily exuding granulating wounds Can remain up to 7 days Forms soft cohesive gel on contact with

Item	Size	Indications	Contraindications	Comments
		donor sites, abrasions, lacerations, first-degree and second-degree burns, traumatic wounds, painful wounds. Use ribbon for dressing sinus, tracking or undermining wounds.	to the dressing or its components	exudate; do not wet before use
Aquacel Ribbon (Convatec) *Threaded fibre*	1cm x 45cm 2cm x 45cm			Do not pack too tightly If bleeding cavity use alginate rope as alternative
Adhesive Film Dressing				***Primary or secondary dressings***
Tegaderm Transparent Film (Solventum)	4.4x 4.4cm **POD S/NEE** 6x 7cm **POD S/NEE PAED** 10x 12cm 10x 25cm 15x 20cm	Acute wounds such as cuts, superficial- and partial-thickness burns, abrasions, intravenous catheter sites and surgical incisions. Can also be applied to low-exuding superficial- and partial-thickness chronic wounds including pressure ulcers, venous leg ulcers. Must only be used as indicated.	Best used 24 hours after hip or knee replacement surgery as a postoperative dressing, if there is a risk of high exudate levels immediately post surgery. Not recommended for use over deep cavity wounds, exuding wounds, infected wounds.	Avoid if exudate present Avoid on sensitive skin Can remain up to 7 days Often used as a secondary dressing, or as prophylactic to prevent friction and shear
Adhesive Tapes				
Micropore (Solventum)	2.5cm	Securing dressings; for patients with skin reactions to other plasters and long-term use	Non-listed	Dressing/bandage retention on non-flexing areas
Mefix (Molnlycke)	5cm 10cm 15cm	Fixation of dressings, swabs.	Non-Listed	Dressing retention on areas prone to rubbing e.g. elbows, heels

Item	Size	Indications	Contraindications	Comments
Mepitac (Molnlycke) Silicone Tape **Specialist Only**	4cmx 150cm	Fixation of medical devices such as drains, tubes, probes, electrodes, IV cannulae and dressings. Also offers skin protection when used under devices such as tubes.	Not suitable for fixation of arterial catheters and arterial cannulae	
Activated Charcoal Non-Absorbent Dressings				
CliniSorb (CliniMed)	10cmx 10cm 10cmx 20cm	Management of malodorous wounds such as fungating wounds, pressure ulcers, leg ulcers and diabetic foot ulcers	Store away from direct sunlight at ambient temperature and humidity. Do not use in cases where there is a known sensitivity to any ingredients.	Moderate and lightly exuding wounds Can be used up to 7 days
Zorflex (H&R) **Specialist Only** **POD S/NEE**	10cm x 20cm	Zorflex is indicated as an antimicrobial dressing for over discharging, partial or full thickness wounds	Do not use on dry wounds	Preferred product of use in moderate to high exudating malodourous wounds especially fungating tumours
Bandages / Stockinette				
Retention Bandage				
Hospiform (Hartmann)	4m x 10cm	Dressing Retention	Apply as manufacturer's instructions	Light bandage for securing dressings When applying on legs, apply from toes to knee to prevent oedema Apply K-soft first when applying on oedematous limbs to prevent bandage cutting into the skin
Comfinette/tube	**Size 01** 1.5cm x20M roll ***Viscose*** **Size 12**	Fingers / Toes	Apply as manufacturer's instructions	Tubular Bandage for dressing retention

Item	Size	Indications	Contraindications	Comments
	3cm x20M roll ***Viscose***			Single use non-elasticated
	Size 56 20M roll ***Cotton***	Adult Limbs		
Advanced Retention Bandages – Restricted settings in NEE only				
Mollelast (L&R) **NEE Community / Specialist Only** **POD S/NEE**	4cm x 4m	Mollelast® is soft and conformable Used to reduce or prevent oedema of the fingers and toes, and to keep dressings in situ.	Follow application guidelines	
Peha-Haft (Hartmann) **POD S/NEE**	10cm x 4cm	Peha-Haft® is a cohesive conforming bandage that may be used. acute	Follow application guidelines	Latex Free For acute and chronic wounds
Support Bandages				
K-Lite (Urgo)	5cm x 4.5m	Provides type 2 light support. Designed for use on sprains and strains, and for the prevention of oedema.	Not suitable for application of pressure on its own, and so should be used in combination with other bandages in the treatment of venous leg ulcers.	Support bandage to secure dressings in place – apply toe to knee at 50% stretch spiral
	10cmx 4.5m			
Elasticated Tubular Stockinette				
Clinifast (Clinisupplies) *2-way stretch*	***Green*** 5.0cm x 1m	Dressing to secure dressings and bandages		5m and 3m lengths are less wasteful than 1m and can accommodate various limb sizes Consider if blue line size (7.5cm) will suffice before requesting a yellow line (10cm) bandage **Do not use Tubigrip** as a retention bandage
	Green 5.0cm x 3m			
	Green 5.0cm x 5m			
	Blue 7.5cm x 1m			
	Blue 7.5cm x 3m			
	Blue 7.5cm x 5m			
	Yellow 10.75cm x 1m			
	Yellow 10.75cm x 3m			
	Yellow 10.75cm x 5m			

Item	Size	Indications	Contraindications	Comments
Clinifast (Clinisupplies) **Restricted/ Specialist only**	*Beige*	17.5cm x 1m 17.5cm x 10m	Dressing to secure dressings and bandages	Do not use as a retention bandage	
Tubifast (Molnlycke) **Restricted/ Specialist only**	*Purple*	20cm x 1m 20cm x 5m 20cm x 10m	Dressing to secure dressings and bandages	Do not use as a retention bandage	
Mechanical Debridement				
For use when debridement is clinically indicated, such as: - **Biofilms** in chronic and/or infected wounds/ulcers - **Hyperkeratosis** present on lower limbs - Aiding wound bed preparation				
Debrisoft Lolly (L&R) **Suffolk / Specialist Only**		One Size	For treatment of biofilm formation and debridement in smaller or cavity wounds	Single use only	**Use only under specialist advice if:** High-risk areas: face, hands, feet, genitalia Ischaemic wounds Suspected malignancy Wounds close to blood vessels, nerves, bone or tendon Patients with blood clotting disorders or inflammatory conditions
Debrisoft Pad (L&R) **Suffolk Only**		10cm x 10cm	Removal of superficial slough and debris, including biofilm, during wound bed preparation.	Prior treatment with autolytic debridement is advised if very stubborn slough or hard necrosis is present Review after 2 weeks	
Alprep Pad (Coloplast) **Restricted/ Specialist in some areas**		7cm x 9cm	For debridement of wounds. Designed to loosen, absorb and remove non-viable tissue, skin scales including hyperkeratotic scales, slough and exudate. To be used with an irrigation solution.	Not intended to be left in the wound, as this has the potential to cause patient harm. Refer to full instructions for use. Review after 2 weeks	

Item	Size	Indications	Contraindications	Comments
UCS Debridement Cloth (mediuk) **NEE Restricted/ Specialist**	20cm x 20cm	Sterile moistened cloth for debridement	Not intended for use as a dressing	
Adhesive Dressing with Absorbent Pad				***Primary or secondary dressings***
Low to Moderate Exudate				
365 Transparent Island (365 Healthcare) *Water resistant* **Excluded in some areas**	4cm x 5cm	Cuts and abrasions; clean closed postoperative wounds; leg ulcers; protection of donor sites; protection against skin breakdown due to friction or continuous exposure to moisture; fixation device for catheters; minor burns	Follow instructions for use	Low to moderate exudate Suitable for surgical wounds, cuts and abrasions Non-adherent pad Waterproof Can be worn for up to 4 days
	5cm x 7.2cm			
	8.5 x 15.5cm			
	10cm x 20cm			
	10cm x 30cm			
Cosmopor E (Hartmann) *Permeable* *Low exudate*	5cm x 7.2cm	Primary dressing to cover wounds without the need for additional tape or bandages For use on lightly exuding wounds	Follow instructions for use Not suitable for use on leg ulcers	
	8cm x 10cm			
	8cm x 15cm			
	10cm x 20cm			
	10cm x 25cm			
	10cm x 35cm			
Foam Dressings				***Primary or secondary dressings***
Silicone Border Foam - Moderate to High Exudate Silicone Foam Dressings				
Mepilex Comfort/Border – ALL settings excluding NEE community **Allevyn Gentle – NEE Community only**				
Allevyn Gentle Border	7.5cm x 7.5cm	Management of shallow granulating	For details of	For use on wounds including pressure

Item	Size	Indications	Contraindications	Comments
NEE Community ONLY **POD NEE**	10cm x 10cm 12.5 x12.5cm	chronic and acute full- and partial-thickness wounds with moderate to high exudate volumes.	precautions, contact supplier	ulcers, leg ulcers, diabetic foot ulcers, surgical wounds, first- and second-degree burns, donor sites, fungating ulcers and skin tears
Mepilex Border Comfort (Molnlycke) 1st line in all settings **excluding NEE community** ***Sizes relevant to POD***	7.5cm x 7.5cm **POD S/NEE** 10cm x 10cm **POD S/NEE** 12.5 x 12.5cm 15cm x 15cm 15cm x 20cm 10cm x 20cm **POD S/NEE** 10cm x 30cm	Designed for wounds such as pressure ulcers, leg and foot ulcers, traumatic wounds and surgical wounds. May be used as part of a prophylactic therapy to help prevent skin damage, e.g. pressure ulcers.	For tails of precautions, contact supplier	Can be left in place for up to 7 days No contact layer needed Can be used under compression or hosiery Can also be used on dry/necrotic wounds in combination with gels.
Mepilex Border Sacrum (Molnlycke)	15cm x 15cm ***Sacrum*** 16cm x 20cm ***Sacrum*** 22cm x 25cm ***Sacrum***	Moderate to highly exuding wounds. May also be used prophylactically to prevent pressure ulcers		
Mepilex Border Flex (Molnlycke)	13cm x 16cm ***Flex Oval*** 15cm x 19cm ***Flex Oval*** **POD S/NEE**	Moderately to highly exuding wounds including pressure ulcers, leg and foot ulcers and traumatic wounds		
Mepilex Border Heel (Molnlycke)	22cm x 23cm **Heel**	Moderate to highly exuding wounds		
Silicone Non-border Foam dressings				
Mepilex XT *non-bordered* (Molnlycke) **Suffolk / Acutes ONLY**	10cm x 11cm 11cm x 20cm 15cm x 16cm 20cm x 21cm	Moderate to highly exuding wounds, wounds with thick, viscous exudate.	Known allergy to components, use with oxidising agents.	Can be left in place for up to 7 days No contact layer needed Can be used under compression or hosiery

Item	Size	Indications	Contraindications	Comments
Non Adhesive Non-Bordered Foam (No Silicone) - For Hypergranulation				
Biatain Foam Non-Adhesive (Coloplast)	5 x 7.5 cm 10 x 10 cm 10 x 20 cm 15 x 15 cm	Aids moist healing environment. For exuding wounds i.e. leg ulcers, pressure ulcers, post-op wounds, Burns. Very fragile skin	Not for use with infected diabetic foot ulcers	Soft and conformable polyurethane foam dressing that effectively absorbs and retains wound exudate 3D fit technology
Specialist Foams –Restriction to use				
3D Fit Silicone Foam Dressings				
For use where a 3D Fit option is clinically indicated – *When applied no filler is required for wounds/ulcers with a depth up to 2cm* ***Restricted to specialists in some settings***				
Biatain Silicone Foam Border (Coloplast) **Excluding Acute** ***Sizes relevant to POD***	7.5cm x 7.5cm **POD S/NEE** 10cm x 10cm **POD S/NEE** 12.5cm x 12.5cm **POD S/NEE** 15cm x 15cm 10cm x 20cm 10cm x 30cm 17.5cm x 17.5cm 15cm x 19cm ***Sacrum*** 14cm x 19.5 ***Multishape*** 18cm x 18cm ***Heel***	Indicated for a wide range of low to highly exuding wounds including acute wounds such as donor sites; postoperative and traumatic wounds; and chronic wounds such as leg ulcers, pressure ulcers and non-infected diabetic foot ulcers. May be used to prevent postoperative blistering. Can be used under compression therapy.	Do not use with oxidising solutions such as hypochlorite and hydrogen peroxide solutions. Ensure that any other evaporating solution is completely dried off before dressing application.	Do not cut the foam part of the product. Refer to full instructions for use.
Biatain Silicone Non-Bordered (Coloplast) **Excluding acute**	7.5 x 7.5 cm 10 x 10 cm	Moderate to highly exuding wounds including leg ulcers, pressure ulcers, non-infected	Do not use with oxidising solutions, e.g hydrogen peroxide.	

Item	Size	Indications	Contraindications	Comments
	10 x 20 cm	diabetic foot ulcers, second-degree burns, donor sites, postoperative wounds and skin abrasions. Can also be used under compression therapy.	Refer to full instructions for use.	
	12.5 x 12.5cm			
	15 x 15 cm			
Advanced Non-adhesive Foam - Specialist Recommended ONLY				
PolyMem Non Adhesive With surfactant (H&R)	8cm x 8cm	For dry to moderately exuding full- and partial-thickness painful wounds such as pressure ulcers, leg ulcers; diabetic foot ulcers; traumatic wounds; skin tears; surgical wounds; first- and second-degree burns; graft sites; radiotherapy-induced skin reactions	Do not use on patients with a known sensitivity to any of the ingredients	
	10cm x 10cm			
	13cm x 13cm			
Adhesive Foam **Specialist Recommended ONLY**				
PolyMem Adhesive With surfactant (H&R)	8.9cm x 11.4cm	For dry to moderately exuding full- and partial-thickness painful wounds such as pressure ulcers, leg ulcers, diabetic foot ulcers, traumatic wounds, skin tears, surgical wounds, first- and second-degree burns, graft sites, and radiotherapy-induced skin damage	Do not use on patients with a known sensitivity to any of the ingredients	
	12.7cm x 8.8cm ***Oval***			
	16.5cm x 20.9cm ***Oval***			
	18.4cmx 20cm ***Sacral***			
	10.8cm x 10cm ***Silver***			
Protease Modulating Dressings **Specialist Recommended ONLY**				

Item	Size	Indications	Contraindications	Comments
Promogran (Solventum)	Small 28cm^2	All chronic wounds that are clear of necrotic tissue and visible signs of infection, including diabetic foot ulcers, venous leg ulcers, pressure ulcers, and mixed aetiologies ulcers	Known hypersensitivity to the components of this product. Discontinue if signs of sensitivity appear.	
Promogran PRISMA (Solventum)	Small 28cm^2			
UrgoSTART contact **(Urgo)**	5cm x 7cm	Low to moderately exuding wounds, including leg ulcers, diabetic foot ulcers, pressure ulcers and long-standing acute wounds	Do not use on infected or critically colonised wounds, cancerous wounds and fistulas wounds that may reveal a deep abscess, or if there is a known sensitivity to the dressing	
	10cm x 10cm			
Absorbent Dressings				
Low to moderate exudate <u>non-border</u>				
Wound Pad Sterile *(Zetuvit OR Premier Pad depending on setting)*	10cm x 10cm	Apply as per manufacturers guidelines Superficial, heavily exuding acute and chronic wound	**Not suitable for application under compression** – can cause moisture and pressure damage	Secondary dressing: requires wound contact layer when applying
	10cm x 20cm			
	20cm x 20cm			
	20cm x 40cm			
Moderate to high exudate - <u>Non bordered</u>				
Kliniderm Superabsorbent (H&R) *Moderate to high exudate*	7.5 x 7.5cm **EKH071**	Primary or secondary dressing – does not require additional wound contact layer	Should not be layered – consider stepping up if exudate not contained	Can be used under compression
	10cm x 10cm			
	20cm x 20cm			
	10cm x 15cm			
	10cm x 20cm			
	20cm x 30cm			
	20cm x 40cm			

Item	Size	Indications	Contraindications	Comments
High exudate – Restricted or specialist use in Acute/Suffolk settings				
Zetuvit Plus Superabsorbent *Without border* **(Hartmann)**	10cm x 10cm	Superficial, heavily exuding acute and chronic wounds		**Can** be used under compression
	10cm x 20cm			
	20cm x 40cm			
Resposorb Silicone *Non-border* **(Hartmann)**	8cm x 8cm	Treatment of a wide range of exuding wounds: acute wounds (e.g. burns, post-op, trauma wounds) and chronic wounds (e.g. venous ulcers, pressure ulcers, diabetic foot ulcers and fungating wounds).	Do not apply if allergies are known to any of the components	For use on moderate to highly exuding wounds in difficult body contours, such as sacral or breast wounds
	12.5 x 12.5cm			
	10cm x 20cm			
	20cm x 20cm			
High exudate - Bordered				
Resposorb Silicone Border *Size includes border* **(Hartmann)**	10cm x 10cm	As above		
	12.5 x 12.5cm			
	17.5 x 17.5cm			
Advanced Absorbent Dressings – Specialist Recommended				
Advanced Superabsorbent Dressings with Horizontal and Vertical wicking abilities such as KerramaxCare or DryMax Super can be accessed on Specialist recommendation where standard dressings are not adequate				

Item	Size	Indications	Contraindications	Comments

Antimicrobial dressings				
NICE states: There is at present no robust clinical or cost-effectiveness evidence to support the use of antimicrobial dressings (for example, silver, iodine or honey) over non-medicated dressings for preventing or treating chronic wounds. Indiscriminate use should be discouraged because of concerns over bacterial resistance and toxicity. **The use of antimicrobial dressings should be commenced when a wound presents with clinical signs of infection. This should be reviewed after 2 weeks of treatment.**				
Manuka Honey – NICE guidance and cautions on Manuka Honey dressing use				
MediHoney Apinate Alginate **(Integra LifeSciences)**	5cm x 5cm 10cm x 10cm 1.9cm x 30cm **Rope**	Acute and chronic wounds: leg/foot ulcers, pressure ulcers, sloughy wounds, infected wounds, malodorous wounds, graft sites burns and surgical wounds	Do not use on patients with a known sensitivity to honey or calcium alginate	Alginate dressing impregnated with honey. Where infection or slough present
MediHoney Tulle (Integra LifeSciences)	5cm x 5cm 10cm x 10cm	Acute and chronic wounds: leg/foot ulcers, pressure ulcers, sloughy wounds, necrotic wounds, infected wounds, malodorous wounds, graft sites, burns, diabetic wounds and surgical wounds	Do not use on patients with a known sensitivity to honey	Knitted viscose mesh dressing impregnated with honey
MediHoney HCS (Integra LifeSciences)	6cm x 6cm 11cm x 11cm	Dry to moderately exuding wounds:	Do not apply if known sensitivity to honey	
MediHoney Antibacterial Wound Gel (Integra LifeSciences)	10g (1 tube)	Superficial wounds; abrasions; infected wounds; burns; pressure ulcers; leg/foot	Do not use on patients with a known sensitivity to honey	Antimicrobial gel for infected wounds

Item	Size	Indications	Contraindications	Comments
		ulcers; surgical wounds; sloughy wounds, necrotic wounds, malodorous wounds, donor and recipient graft sites		
Actilite (Advancis Medical) **Specialist ONLY**	5cm x 5cm 20cm x 20cm 20cm x 30cm	Use on infected wounds, those of high microbial concentration, very sloughy wounds or those requiring debridement	Caution with Patients who are diabetic or unstable blood sugars – can be painful and not all patients can tolerate. DO NOT USE IF ALLERGIC TO BEE STINGS	TVN use and approval or approved rolling antimicrobial treatment agreement.
Paste Bandages (Restricted depending on setting/location)				
Ichthopaste Zinc Bandage (Evolan)	7.5cm x 6cm	For the treatment and management of venous leg ulcers and their associated skin conditions and for use in dermatology to treat chronic eczema and dermatitis. Can be used as a primary contact layer under compression therapy systems where venous insufficiency exists.	Do not use in known cases of sensitivity or allergy to any of the ingredients	Zinc Paste (6%) Ichthammol (2%)
Viscopaste PB7 (Evolan)	7.5cm x 6m	For the treatment and management of venous leg ulcers and their associated skin conditions and for	Do not use in known cases of sensitivity or allergy to any of the ingredients	Use correct technique when applying *Not to be applied as spiral*

Item	Size	Indications	Contraindications	Comments
		use in dermatology to treat chronic eczema and dermatitis. Can be used as a primary contact layer under compression therapy systems where venous insufficiency exists.		
ZIPZOC (Evolan)	One size	Venous leg ulcers and associated skin conditions	Arterial and diabetic ulceration; sensitivity or allergy to ingredients	Zinc impregnated sock box of 4
Gauze Dressing Impregnated				
Cutimed Sorbact (Essity) *Dry Mesh Swabs*	4cmx6cm	Primary dressing for contaminated, colonised or infected superficial or deep wounds including superficial wounds, traumatic wounds, postoperative or dehisced wounds, ulcers (venous, arterial, diabetic, pressure) and fungal infections. Suitable for fungal infections in the groin, skin folds, or between digits.	Do not use in combination with ointments and creams as the binding effect is impaired	Primary dressing for contaminated, colonised or infected wounds. Change 1-3 days depending on the wound condition
	7cmx9cm			
	2cm x 50cm **Ribbon**			

Item	Size	Indications	Contraindications	Comments
Cutimed Sorbact Gel (Essity) *impregnated Mesh swabs*	7.5cm x 7.5cm 7.5cm x 15cm	Postoperative dehisced wounds, traumatic wounds, wounds occurring after excision of fistulae and abscesses and chronic wounds such as venous, arterial, pressure or diabetic foot ulcers	Known hypersensitivity to the gel or its individual ingredients	Cutimed Sorbact swab with an amorphous hydrogel Change every 1–3 days depending on the wound condition Can be used for dry to low exuding wounds that are contaminated, colonised or infected
Povidine Iodine				
NICE guidance and cautions in Iodine dressing use *The BNF usage guidance has been updated to reflect new contraindications in the use of Povodine Iodine – This can be accessed here*				
Inadine (Solventum) **TVN/ Specialist Recommended only**	5cmx5cm 9.5cmx 9.5cm		Refer to BNF	Low adherent knitted viscose fabric containing povidone iodine Colour change from orange to white as iodine released
Cadexomer Iodine				
NICE guidance and cautions in Iodine dressing use *Please review the updated BNF guidance on the cautions of the use of Cadexomer Iodine here* **For use on: BIOFILMS in combination with mechanical debridement within the two week challenge – Wounds UK (2020) Antimicrobial Stewardship Strategies in Wound Care**				
Iodoflex paste (S&N)	5g	Higher concentration iodine based cadexomer paste or ointment, infected or high bacteria concentration on wounds, can deslough	When higher concentration of iodine is needed a standard product has proved ineffective. CAUTION with patients with thyroid	Use caution on patients with thyroid disease – monitor
Iodosorb Ointment (S&N)	10g (1 tube)			

Item	Size	Indications	Contraindications	Comments
Iodosorb Powder 3g sachet (S&N)	3g sachet		conditions – need regular blood testing of TFT. Can be painful for patients.	
Alginate gels with antimicrobial properties				
Flaminal Hydro (Flen Health) *Low alginate based gel*	15g (1 tube) 50g (1 tube) ***For larger cavities***	Wounds with high microbial content or infected, burns. Can help debride and balance moisture content	Restricted use or specialist only for burns/plastics treatment.	Moderate to heavy exudate Can be re-capped and re-used on the same patient To debride soft necrotic tissue/slough **with high bacterial load**
Flaminal Forte (Flen Health) *High alginate based gel*	15g (1 tube) 50g (1 tube) ***For larger cavities***			
Reactive Oxygen– Specialist/Restricted in some settings				
SurgiHoney RO 20g **(H&R)**		Has a broad-spectrum antimicrobial action, including antibiofilm properties. Can also be used to assist the healing process. Suitable for use in all stages of the healing process on a wide range of acute and chronic wounds.	Do not use on patients who have an allergic reaction to honey or other bee-related products. Do not use on bleeding wounds.	May be used on patients who are intolerant to some sugars, under the supervision of a health professional.
Antimicrobial PHMB– Specialist / Restricted				
Prontosan Solution **(B Braun)**	350ml Ampoule 4 pack	Cleansing, decontamination and moisturizing of acute and chronic skin wounds, first and		

Item	Size	Indications	Contraindications	Comments
		second degree burns		
Prontosan X Wound Gel **(B Braun)**	**50g tube** *Lasts for 8 weeks*	To cleanse, decontaminate and moisturise acute and chronic skin wounds, and first- and second- degree burns		COSHH leaflet
Suprasorb X +PHMB (L&R)	**5x5cm** **14x20cm**	Light to moderately exuding, superficial and deep, infected wounds	Full thickness burns, cartilage injuries. Do not use Suprasorb X+PHMB on patients sensitive to any of the components of the dressing.	Bio Cellulose Antimicrobial Dressing A moist wound dressing for critically colonised and infected wounds
Silver - NICE evidence and cautions on Silver dressing use				
Polymer				
Atrauman Ag (Hartmann) *Polymer*	5cm x 5cm 10cm x 10cm 10cm x 20cm	Suitable for use as a protective layer on non-exuding wounds and on sensitive skin areas		Soft polymer wound contact dressing No absorption properties
UrgoTul Silver (Urgo) **Specialist Only**	15cm x 20cm	All wounds at risk of or with signs of local infection, including chronic wounds. Can be used with a secondary dressing or under compression. Due to its non-adhesive nature it is recommended for wounds with weakened periwound skin.	. Do not use on patients with a sensitivity to silver. Do not use on patients undergoing an MRI scan; a new dressing can be applied after the procedure.	

Item	Size	Indications	Contraindications	Comments
Hydrofiber				
Exufiber Ag (Molnlycke) **Suffolk Only**	2x45cm 5x5cm 10x10cm 15x15cm	Medium to highly exuding wounds, such as venous leg ulcers and diabetic foot ulcers.		
Aquacel AG+ Extra (Convatec) **NEE Only**	5cm x 5cm 10cm x 10cm 15cm x 15cm 2cm x 45cm 1cm x 45cm	Primary dressing for moderately to highly exuding wounds that are infected or at increased risk of infection, and wounds where bacteria are a suspected cause (or a factor in) chronicity/non-progression.	Should not be used on individuals who are sensitive to or who have had an allergic reaction to the dressing or its components	When dressing sinus, tracking or undermining wounds, use Aquacel Ag+ ribbon dressing.
Haemostatic Alginate Ag				
Biatain Alginate Ag (Coloplast) *Alginate fibre* **Specialist or Restricted depending on settings**	5cm x 5cm 10cm x 10cm 15cm x 15cm 3cm x 44cm	Indicated for use in the management of the following moderate to heavily exuding partial to full-thickness wounds including postoperative wounds, leg ulcers, pressure ulcers, diabetic foot ulcers, donor sites, cavity wounds, superficial and partial-thickness burns. For external use only.	Not indicated for use on dry or lightly exuding wounds, on individuals with a known sensitivity to alginates or silver, or to control heavy bleeding. Refer to full instructions for use.	Gelling cellulose dressing Designed to be left in place for up to 7 days Haemostatic properties for bleeding wounds Absorption properties

Item	Size	Indications	Contraindications	Comments

Compression Bandages – Special Consideration				
A full holistic assessment and doppler must be completed prior to commencing compression therapy to determine whether compression is clinically appropriate. Please refer to the SNEE Lower Limb Compression Formulary. All health care professionals undertaking Doppler and/or compression therapy must have undertaken leg ulcer management training and remained current in their level of competence.				
Short-Stretch				
Actico (L&R) *Cohesive*	8cm x 6m 10cm x 6m	Treatment and management of venous leg ulcers, lymphoedema and chronic oedema. Suitable for mobile and immobile patients, and those with an ABPI of between 0.5–1.3. An ABPI of 0.5–0.8 or >1.3 requires further investigation before use (please refer to local guidelines).	Caution required when cardiac overload is suspected and/or diabetes, advanced small vessel disease, arterial disease, renal failure or rheumatoid arthritis is present. Do not use if there is known sensitivity to the bandage.	Short stretch compression for oedematous limbs Apply 50% spiral full stretch Ensure adequate padding k-soft is applied prior to application to prevent pressure damage Not suitable for ankle circumference of <18cm unless padding is used to increase it to ≥18cm. An ABPI of between 0.5>0.8 or above 1.3 requires further investigation before use (please refer to local guidelines).
Multi-Layer				
Urgo KTwo kit Full (Urgo) Compression *2-layer system* *Latex Free*	18-25cm (10cm) 25-32cm (10cm)	2 layer and 4-layer compression bandaging systems	Full holistic assessment and doppler required prior to treatment	Best practice advocates full compression of 40mmgh where doppler readings are appropriate Longer bandages are available for patients with longer limbs
Urgo Ktwo Reduced (Urgo) *2-layer system* Latex Free	18-25cm (10cm) 25-32cm (10cm)			

Item	Size	Indications	Contraindications	Comments
K-Soft layer #1 (Urgo)	10cm x 3.5m			
K-Lite layer #2 (Urgo)	10cm x 4.5m			
K-Plus layer #3 (Urgo)	10cm x 8.7m			
Ko-Flex layer # 4 (Urgo)	10cm x 6m			

Item	Size	Indications	Contraindications	Comments

Negative Pressure - Restricted or Specialist ONLY depending on setting				
Single use disposable system				
Pico 7 (S&N) (replacing previous version of Pico) *Contains 2 dressings + 1 battery pump*	10cm x 20cm 10cm x 30cm 10cm x 40cm 15cm x 15cm 15cm x 20cm 15cm x 30cm 20cm x 20cm 25cm x 25cm 15cm x 20cm ***Multisite*** 20cm x 25cm ***Multisite***	Examples of appropriate wound types include: chronic, acute, traumatic, subacute and dehisced wounds, partial-thickness burns, ulcers (such as diabetic or pressure), flaps and grafts, and surgically closed incision sites. Suitable for use in hospital and home care settings.	Do not use on patients with malignancy in the wound bed or wound margins (except in palliative care to improve quality of life); previously confirmed or untreated osteomyelitis; non-enteric and unexplored fistulas; necrotic tissue with eschar present; exposed arteries, veins, nerves or organs; exposed anastomotic sites; emergency airway aspiration; pleural, mediastinal or chest tube drainage; and surgical suction. Always refer to instructions for use for information on indication, application and contraindications.	Canister-free, single-use therapy, provided as a complete seven day kit May require more packs if high exudate levels and if changing more frequently For use on wounds up to 2cm depth To kick-start wound healing or stepping down from vacuum pump ***Patients must be clinically assessed and deemed appropriate prior to commencing treatment***

PICO 7 is a negative pressure dressing produced by Smith & Nephew. This can be used as a step down from high negative pressure treatment (i.e. Renasys), or to kick start difficult to heal wounds.

PICO 7 <u>can only be used on wounds which meet the specified criteria</u> outlined by the manufacturer.

⚠ **<u>Caution</u>**: PICO 7 Pump **<u>contains a MAGNET</u>** You must keep the pump at least 10cm away from implantable devices such as pacemakers, defibrillators, shunt valves, neurostimulators, cochlear implants, or other life sustaining equipment such as insulin pumps. This warning applies to ALL users, including patients, caregivers, healthcare professionals, and all people who may come within 10cm of the device – See manufacturer instructions and cautions leaflet for future information.

Item	Size	Indications	Contraindications	Comments

Renasys NPWT Consumables & Accessories – Restricted Use Product				
Renasys Soft Port	One Size	Suitable for use on surgical and chronic wounds following specialist review	*To be commenced or continued following specialist review and recommendation* Please refer to manufacturers guidelines and instructions.	Review progress of wound weekly
Gauze Wound Filler	One Size - 5pack			
Renasys-G Specialist Drain Kits	Round 10fr			
	Round 19fr			
	Flat 10mm			
	Channel15fr			
Renasys-G Gauze *Dressing Kit with soft port*	Small			
	Medium			
	Large			
Renasys-F Foam *Dressing Kit with soft port*	Small			
	Medium			
	Large			
Renasys Touch Canister	300ml			
	800ml			
Renasys Y Connector *(for use with soft port)*	One Size			
Renasys Adhesive Gel Patch	One size			
Kerlix AMD Gauze	11.4cm x 3.7m **Roll**			
Kerlix AMD Gauze Specialist only	**Squares** 480 Pk Case			

Any support and training for using Pico 7 and Renasys devices can be obtained by contacting local Renasys product specialists. See information below for contact detail.

Local Smith & Nephew Contacts
Smith & Nephew Representative: Claire Alvin Claire.Alvin@smith-nephew.com
Telephone 07860 735035
Technical Helpline: 24hr Technical Support T: 0800 915 5394
Customer Care: T: 0845 250 1031
Website guidance and education: https://www.smith-nephew.com/health-care-professionals/products

Medicines Management – Suffolk and North East Essex	
Email	medicines.optimisation.nurses@snee.nhs.uk
Website	Appliances - NHS Suffolk and North East Essex ICB
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North East Essex	tvn@esneft.nhs.uk
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