

**Tried. True. Trusted**

- Over 20 years of global heritage
- More than 365 pieces of evidence



✓ Can be cut to shape\*



✓ Facilitates easy removal



✓ Effective under compression†



✓ Soft, gentle, conformable and highly absorbent



✓ 7-day wear time\*

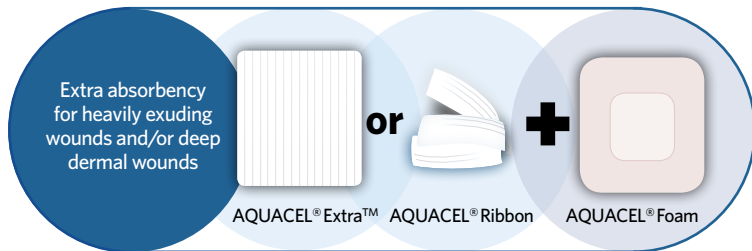
Can be cut to any size based on wound dimensions and needs

Reliable absorbency, even under pressure

Stitch-bonded for extra strength

†Please refer to AQUACEL Extra Dressing package insert for complete Instructions for Use.

Using a partnership of tried and tested AQUACEL dressings provides effective wound management, supported by over 20 years of clinical heritage. AQUACEL Extra Dressing is designed to work in partnership with AQUACEL Foam Dressing, the only foam that effectively accepts fluid from AQUACEL Extra dressing\*<sup>16</sup>



\*As demonstrated *in vitro*



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**AQUACEL® EXTRA™**  
dressing in practice



# OPTIMAL WOUND MANAGEMENT USING AQUACEL EXTRA DRESSING

## ASSESS

### Holistic assessment

<b>Patient</b>	Medical status and history, psychological wellbeing, nutritional status and lifestyle, care environment, pain levels
<b>Wound</b>	Wound history, type, size, exudate levels, malodour, periwound and surrounding skin condition, previous dressing choice <sup>1</sup>

### Exudate challenges

Small amounts of exudate are required for healing<sup>2</sup>, but too much exudate can cause problems:

- Maceration of skin on the periphery of the wound<sup>3</sup>
- Damage to the wound bed and delayed healing<sup>3</sup>
- More frequent dressing changes and more labour-intensive wound care<sup>4</sup>.

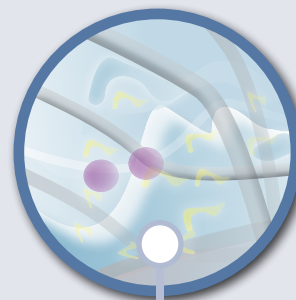
### Indications

AQUACEL® EXTRA™ Dressing can be used to manage a wide range of chronic and acute wounds:

- Leg ulcers
- Diabetic foot ulcers
- Pressure ulcers
- Partial thickness burns
- Surgical wounds
- Trauma wounds.

## MANAGE

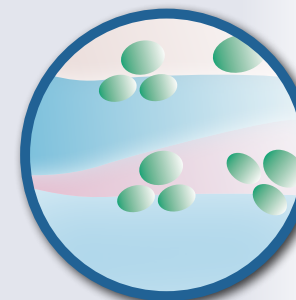
➤ AQUACEL EXTRA Dressing is powered by Hydrofiber® Technology



■ Locks in harmful enzymes and bacteria<sup>5-8</sup>.  
Reduces lateral spread to help prevent maceration to the surrounding skin<sup>9,10</sup>



■ Micro-contours to the wound bed<sup>11</sup>, helping to maintain an optimal moisture balance<sup>12</sup> and eliminate dead space where bacteria can grow<sup>11,13</sup>



■ Responds to wound conditions by forming a cohesive gel\*, while helping to minimise pain associated with dressing changes<sup>14,15</sup>

\*As demonstrated in vitro

## MONITOR

Reassess and document the wound at each dressing change

- Wound bed condition (% viable, % non-viable tissue)
- Location
- Size (length, width, depth)
- Exudate (colour, consistency, level)
- Associated pain or odour
- Associated signs and symptoms of infection
- Periwound skin condition (swelling, discolouration, bruising, maceration)

**REASSESS** Repeat cycle at each dressing change