Prevention is possiblePrevention is powerful

A comprehensive guide to using ALLEVYN^{\$} LIFE Dressings to prevent pressure injuries in the ICU, OR, and ER.

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ALLEVYN^{\$} LIFE Foam Dressings

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Understanding the impact of pressure injuries

2.5 million Americans are affected by pressure injuries each year¹

\$21,784Average cost each pressure injury adds to a hospital stay²

4–6X Greater risk of in-hospital mortality²

9.5 days Average increase in length of hospital stay²

How pressure injuries develop

Contributors to localized skin injury:³⁻⁵

- 1. Pressure
- 2. Shear
- 3. **Microclimate,** which can exacerbate the effects of pressure, shear and friction, is caused by factors such as:
 - Prolonged humidity and moisture, which can lead to tissue breakdown and tearing
 - Heat, which increases metabolism, while pressure hinders blood flow, preventing tissue from getting oxygen and nutrients
 - Cold, which leads to hypothermia, further reducing circulation and oxygenation

When pressure injuries develop, patients are in pain and may develop infections at the site of injury.⁶



Surface pressure

4

Choose a dressing designed for prevention

Prophylactic dressings differ in quality. Considerations should include:³

- Ability to manage microclimate
- Ease of application and removal
- Ability to regularly assess the skin
- Location of dressing application
- Correct dressing size and shape
- Ability to redistribute pressure

The National Pressure Injury Advisory Panel recommends the use of foam dressings as part of a comprehensive pressure injury prevention program.³

The ALLEVYN[®] LIFE difference

ALLEVYN LIFE is an all-in-one dressing for wound management and pressure injury prevention⁷

Unique five-layer construction absorbs fluids and redistributes pressure⁷⁻¹⁷

Breathable

Film layer provides a bacterial barrier

Discreet

Strikethrough-masking layer

Hyper-absorbent

Lock-away core helps minimize leakage of fluid

Protective

Hydrocellular foam cushions, absorbs exudate

Gentle and secure

Silicone adhesive wound contact layer can be repositioned¹⁵ and may reduce trauma to the wound during dressing changes

2X longer wear time than other dressings⁺



Up to **5 days wear** on the sacrum | Up to **7 days wear** on other locations*

*Depending on the nature of the wound and exudate level, when used as indicated. †Tested on Mepilex™ Border

Performance under pressure

Compared to standard preventive care alone, ALLEVYN^o LIFE has been shown to:

Reduce incidence of sacral pressure injuries by up to **7196**¹⁸

Produce per-patient cost savings up to **69%**

Relieved more pressure than leading competitors.²⁰

The multi-layer foam design helps protect against pressure injuries¹⁸ by redistributing pressure and protecting areas subject to friction and shear.²

Across all applied forces, when tested on both dry and wet dressings, ALLEVYN LIFE Dressings spread the pressure over a greater contact area, resulting in lower average and peak pressures when compared to Mepilex[™] Border and Optifoam[™] Gentle SA *(in vitro*).



Pressure distribution wound contact side

Pressure distribution wound contact side

The results were statistically significant; testing was conducted based on a powered sample size. Pressure mapping is a demonstration measuring only pressure and does not replace the need for clinical evidence of effectiveness.

ALLEVYN^o LIFE works with a variety of medical devices including:



Available in three unique designs and multiple sizes to fit your pressure injury prevention and/or wound management needs.







Common pressure injury risk factors for ICU patients²¹⁻²²

Know these risk factors

- 1. Advanced age
- 2. Length of stay
- 3. Prolonged lack of mobility
- 4. Vasopressor administration infusion
- 5. Cardiovascular disease
- 6. Sedation
- 7. Inability to self-turn or reposition
- 8. Mechanical ventilation
- 9. Incontinence

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Follow these guidelines to keep your patients free from pressure injuries:

- Identify at-risk patients^{6,21,24}
 - The Braden Scale (score <18) or other risk-assessment scores
 - Over the age of 70
 - · Diabetes
 - · Surgery lasting longer than four hours
- Inspect skin thoroughly and often¹
- Adhere to your institution's pressure injury prevention guidelines
- Appropriately document your efforts^{1,4}
- Work together to streamline prevention processes²⁵
- Use a soft silicone multi-layered foam dressing to protect the skin of individuals at risk for pressure injuries—continue to implement other preventive measures when using dressings^{3,26}

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Did you know?

incidence of pressure injuries in critical care settings (prevalence may reach 82%)²³

1 in 3

pressure injuries in hospitalized adult patients are related to medical devices²⁹

See how ALLEVYN^{\o} LIFE can work with a variety of medical devices.

Learn More

Common points of pressure^{4,27}

Most common locations:

- Sacrum
- Back
- ButtocksHeels
- Occiput
- Elbows

Supine position



Sitting position



Lateral position



Wheelchair position



Protection against device-related injuries:²⁸

Area at risk
Forehead, nose, cheeks
Nose, cheeks, ears
Hands
Ears
Chin, clavicle

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Common pressure injury risk factors for OR patients³⁰

Know these risk factors

- 1. Time in OR bed or surgery lasting more than 2.5 hours
- 2. Positioning of patient and devices
- 3. Warming devices
- 4. Anesthesia and sedation

- 5. Vasoactive medications
- 6. Instrumentation (e.g., retractors)
- 7. Type of surgery
- Intraoperative hemodynamics such as diastolic pressure
 <60mmHg

Did you know?

of healthcare-acquired pressure injuries occur in surgical settings³¹



higher risk of pressure injury development for every 30 minutes of surgery beyond four hours³²

See how ALLEVYN^{\o} LIFE can work with a variety of medical devices.

Learn More

Use validated screening tools to identify at-risk patients³³⁻³⁴

Follow these guidelines to keep your patients free from pressure injuries:

 Use Scott Triggers to identify patients at high risk (two or more of the following)

Age greater than 62 years

- 1. Serum albumin < 3.5 g/dL
- 2. ASA Score >3
- Anticipated time in the OR >3 hours (180 minutes)
- Determine risk using the Munro Scale at three time points
 - Pre-operative: 7-14 = moderate risk;
 15 or greater = high risk
 - Intraoperative: 14-24 = moderate risk; 25 or greater = high risk
 - 3. Post-operative: 16-28 = moderate risk; 29 or greater = high risk
- Perform a thorough assessment of skin condition before, during and after surgery^{4,35}
- Adhere to your facility's pressure injury prevention guidelines
- Appropriately document your efforts^{4,35}
- Work together to streamline processes related to prevention³⁶
- Use a soft silicone multi-layered foam dressing to protect the skin of individuals at risk for pressure injuries—continue to implement other preventive measures when using dressings^{3,37}

Common points of pressure^{4,5,38-42}

Pressure injuries can appear within 48 to 72 hours after surgery.



Most common locations of pressure injuries:¹⁷ • Ischium (28%) • Sacrum (17-27%) • Trochanter (12-19%) • Heel (9-18%)

Device	Area at risk
(NIPPV) Non-invasive positive pressure ventilation/BIPAP	Forehead, nose, cheeks
Nasotracheal tubes/nasal cannulas	Nose, cheeks, ears
Wrist brace	Hands
Nasal cannula/oximetry probe	Ears
Cervical collar	Chin, clavicle
Splint	Heels
Straps	Ankles, arms, hips, etc.
Backboard	Occiput, shoulders, back

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Common pressure injury risk factors for ER patients⁴³

Know these risk factors

- 1. Age >70
- 2. Dehydration and poor nutrition
- 3. Moist skin

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- 4. Braden score
- 5. Poor sensory reception
- Comorbid conditions
 (diabetes, pulmonary disease)

- 7. Spinal immobilization and/or cervical collar use
- 8. Poorly padded ER equipment and restrictive positioning
- 9. Prolonged immobilization
- 10. Head-of-bed elevation



of patients in the ER will develop a pressure injury⁴⁵

99.2%

of patients who develop a pressure injury are in the ER for more than two hours⁴⁴

See how ALLEVYN^o LIFE can work with a variety of medical devices.

Learn More

Follow these guidelines to keep your patientsfree from pressure injuries:

- Timeliness is essential pressure injuries can develop in as little as two hours⁴⁴⁻⁴⁵
- Identify patients at high risk using:⁶
 - The Norton Scale (score <14)
 - The Braden Scale (score <18)
 - Other risk-assessment tools
- Inspect skin thoroughly and often¹
- Application of a prophylactic dressing should be initiated as early as possible in the care pathway, *i.e. in the Emergency Room*

- Adhere to your institution's pressure injury prevention guidelines
- Appropriately document your efforts^{1,4}
- Work together to streamline prevention processes²⁶
- Use a soft silicone multi-layered foam
 dressing to protect the skin of individuals
 at risk for pressure injuries—continue to
 implement other preventive measures
 when using dressings^{3,27}

Common points of pressure^{4,5}

Most common locations:^{27,38,41}

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- Sacrum
- Back
- Buttocks Heels
- Occiput
- Elbows .

Supine position



Lateral position



Sitting position



Wheelchair position



Most common risk areas related to medical device injuries:^{24,28}

Device	Area at risk
Cervical collar	Chin, clavicles
Wrist brace	Hands
Splint	Heels
Wraps	Elbows
Straps	Ankles
Backboard	Occiput, shoulders, back

ALLEVYN[◊] LIFE: Helping you get CLOSER TO ZERO™ pressure injuries.

From maintaining a moist wound environment that's conducive to healing,^{8,16} to helping protect against pressure injuries as part of standard prevention protocol,^{19,20} ALLEVYN LIFE Foam Dressings help patients get back to their best life.

ALLEVYN LIFE Product Ordering Codes

Product	Dressing sizes	Dressings		
number	Border to border	Pad size	per box	
66801067	4in x 4in	2in x 2in	10	
66801068	5 ¹ /16in x 5 ¹ /16in	3in x 3in	10	
66801069	6¹/16in x 6¹/16in	4in x 4in	10	
66801070	8 ¹ /4in x 8 ¹ /4in	6in x 6in	10	
66801304	Heel 9in x 9¹/ଃin	7 ⁷ /sin x 8in	5	
66801306	Sacrum 6³/₄in x 6²/ଃin	4 ⁷ /8in x 3 ⁵ /16in	10	
66801307	Sacrum 8¼₂in x 9in	6 ³ /4in x 4 ¹³ /16in	10	

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