

Revised: 2025 January















## **Product Information Sheet**

EdemaWear								
Lower Limb Compression Application								
Classification	Compression Therapy: Tubular Longitudinal Compression							
British Columbia	• As per health authority or agency policy/or standards, prior to the first application of wrap,							
Practice	tubular bandage or stocking that provides 20mmHg or less compression:							
	o A Lower Limb Assessment (Basic & Advanced) is to be done but an Ankle Brachial Pressure							
	Index and/or a Toe Pressure Brachial Index is not required if pedal pulses are palpable or							
	present with a hand-held doppler and capillary refill is normal.							
	o An order is not required.							
	• Refer to <u>Application of Compression Therapy: Guideline</u> for further information related to							
	indications, precautions, and contraindications of compression therapy.							
Key Points	• EdemaWear is a latex-free tubular compression stocking that provides as a single layer 15-20							
	mmHg (moderate) compression (the tighter the fit, the higher the compression). Compression is generated by wales of nylon fabric with transverse Lycra™ elastic fibre; the compression makes noticeable 'corn rows' which run up/down the limb.  • EdemaWear Lite provides 5-10 mmHg (low) compression for clients who are unable to manage							
	moderate compression.							
	• Stockings are single client use and are washable and reusable for up to 4-6 months.							
British Columbia	• As per health authority or agency policy/or standards, prior to the first application of wrap,							
Practice	tubular bandage or stocking that provides 20mmHg or less compression:							
	o A Lower Limb	Assessment (	Basic & Adva	nced) is to be	e done but an	Ankle Brachial Pressure		
	Index and/or a Toe Pressure Brachial Index is not required if pedal pulses are palpable or							
	present with a hand-held doppler and capillary refill is normal.							
	o An order is not required.							
	• Refer to Application of Compression Therapy: Guideline for further information related to							
	indications, precautions, and contraindications of compression therapy.							
Indications	For clients who require compression therapy for the treatment of:							
	<ul> <li>Venous insufficiency (with or without wounds).</li> <li>Mixed arterial / venous insufficiency (with or without wounds).</li> <li>Lymphedema (with or without wounds).</li> <li>Generalized edema.</li> </ul>							
Precautions	<ul> <li>Use the Lite version for legs with predominant boney prominences to prevent tissue damage.</li> <li>Stocking should not slip down or bunched around ankles as it may cause a tourniquet effect.</li> </ul>							
Contraindications	Do not use in the presence of uncontrolled heart failure.							
	Do not use in the presence of an untreated lower limb skin or wound infection.							
Formats & Sizes	Stocking	Small	Medium	Large	X-Large			
	Regular			8-				
	Stripe colour	Navy	Yellow	Red	Aqua	20 .		
	Circumference	45 cm	75 cm	115 cm	150 cm	060		
	Stocking length	55 cm	86 cm	60 cm	60 cm			
	Use Lite	Foot - Knee	Foot - Groin	Knee - Groin	Knee - Groin			
	Stripe colour	Purple	Orange					
	Circumference	60 cm	90 cm					
	Stocking length	55 cm	86 cm					
	Use	Foot - Knee	Foot – Groin					

Directions	Rationale / Key Points		
Selection			
Prior to the client mobilizing and with the client supine, measure the circumference of the widest part of the calf or if the whole limb is to be compressed, then the thigh. Select the size of stocking based on calf or thigh measurement.	To determine appropriate size required and also provides a base-line measurement of the edema.		



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Directions	Rationale / Key Points					
Determine the length of stocking required by measuring from the base of the toes, following the contours of the leg, up to two finger widths below the knee or top of thigh. Cut stocking.	Compression can be applied from toes to knee or toes to thigh.					
Preparation						
Wash or shower leg(s) with warm water using a pH-balanced skin cleanser.	To remove dead skin and resolve/prevent dry skin.					
Moisturize intact skin with agency approved moisturizer; allow moisturizer to absorb/dry before putting on the stocking.						
Apply an appropriate cover dressing if wound present. <b>Application</b>						
Roll the stocking like a sock, apply it to the foot and then roll it up the leg. The top of the stocking should sit two finger widths below the knee or below the groin.	Finishing the stocking two finger widths below the knee will protect the popliteal fossa from the effects of the compression.					
Smooth stocking to ensure no wrinkles or creases.						
Removal						
Remove stocking by rolling it back down the leg. The foot and leg will have 'corn row' markings from the compression; this is expected.	Reduction of edema may result in the stocking slipping. A stocking bunched around the ankle may cause a tourniquet effect.  Having the outside material of the stocking next to the skin may limit the stocking from slipping.					
If stocking is slipping, remove stocking:  o Turn it inside out and reapply or  o Cut the new stocking longer by 7.5 cm, reapply with a 7.5 cm cuff at the top of the stocking.  o Re-measure the limb and select another size of stocking.						
Frequency of Application						
Stocking should be removed at night and reapplied in the morning prior to the client getting out of bed, if possible. If stocking is worn for 24hrs it is to be removed and reapplied once within the 24hrs.	Removing the stocking allows for inspection and care for the skin (washing and/or moisturizing) of the lower leg and foot.					
	Edema in the lower legs/feet should be less in the morning if the client has had their feet up in bed for the night.					
Care of Stockings						
Machine or hand wash in cold water if stocking is soiled or has lost its shape; hang to dry. Hydrogen peroxide may be to remove any blood stains, do not use bleach.	Washing will help to reset the elasticity of the stocking. Bleach destroys the elasticity of the product.					
Client may need two sets of stockings to allow the alternate stocking to dry after washing.						
Replace stocking at least every 4-6 months or when it has lost its elasticity.						
Expected Outcomes						
Measurable improvement in the ankle and calfmeasurements within 1 week.	If there is no measurable improvement in the amount of edema within one week, consult with Most Responsible					
Absence of, or minimal edema, if used for prevention/maintenance of venous insufficiency.	Provider.  If product does not perform as expected, notify					
Product performs as expected.	NSWOC/ Wound Clinician and then consider submitting a <u>Supply Chain Product Concern Form</u>					
For further information please contact NSWOC/Wound Clinician						