















Product Information Sheet

EdemaWear							
Lower Limb Compression Application							
Classification	Compression Therapy: Tubular Longitudinal Compression						
British Columbia	Prior to the first application of a compression wrap, tubular bandage or stocking, a Lower Limb						
Practice	Assessment (Basic & Advanced) is to be done but Ankle Brachial Pressure Index (ABPI) and Toe						
	Pressure Brachial Index (TBPI) are not required for the application of compression less than 20						
	mmHg if pedal pulses are palpable and capillary refill is normal.						
	An order is required from a Physician/NP, or as per Health Authority (HA) policy a NSWOC/						
	Wound Clinician, for the application of a wrap, tubular bandage or stocking that provides						
	compression therapy of 20 mmHg or higher.						
	Only health care professionals who have successfully completed additional education for						
	compression therapy may apply a wrap, tubular bandage or stocking that provides compression						
	20 mmHg or higher. Follow HA/agency compression therapy policies or practice standards.						
	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 'corr	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 significant	Stockings are single client use and are washable and reusable for up to 4-6 months.					
Indications	For clients who require compression therapy for the treatment of:						
	o Venous insufficiency (with or without wounds).						
	 Mixed arterial / venous insufficiency (with or without wounds). 						
	o Lymphedema (with or without wounds).						
	o Generalized edema.						
Precautions	Use the Lite version for legs with predominant boney prominences to prevent tissue damage.						
	• Stocking should not slip down or bunched around ankles as it may cause a tourniquet effect.						
Contraindications	Do not use in the presence of uncontrolled heart failure.						
	Do not use in th	e presence of	an untreated	lower limb sk	in or wound ir	nfection.	
Formats & Sizes	Stocking	Small	Medium	Large	X-Large		
	Regular						
	Stripe colour	Navy	Yellow	Red	Aqua		
	Circumference Stocking length	45 cm 55 cm	75 cm 86 cm	115 cm 60 cm	150 cm 60 cm	060	
	Use	Foot - Knee	Foot - Groin	Knee - Groin	Knee - Groin		
	Lite		3.5	5.0.11			
	Stripe colour	Purple	Orange				
	Circumference	60 cm	90 cm				
	Stocking length Use	55 cm Foot - Knee	86 cm Foot – Groin				
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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.
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 the stocking.	Compression can be applied from toes to knee or toes to thigh.

















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Directions	Rationale / Key Points				
Preparation	Rationale / Rey Folits				
Wash or shower leg(s) with warm water using a pH-balanced skin cleanser. Moisturize intact skin with agency approved moisturizer; allow moisturizer to absorb/dry before putting on	To remove dead skin and resolve/prevent dry skin.				
the stocking.					
Apply an appropriate cover dressing if wound present.					
Application Roll the stocking like a sock, apply it to the foot and then roll it	Finishing the stocking two finger widths below the knee				
up the leg. The top of the stocking should sit two finger widths below the knee or below the groin.	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. If stocking is slipping, remove stocking:	Reduction of edema may result in the stocking slipping. A stocking bunched around the ankle may cause a tourniquet effect.				
 Turn it inside out and reapply or Cut the new stocking longer by 7.5 cm, reapply with a 7.5 cm cuff at the top of the stocking. Re-measure the limb and select another size of stocking. 	Having the outside material of the stocking next to the skin may limit the stocking from slipping.				
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 calf measurements 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 Supply Chain Product Concern Form				
For further information please contact NSWOC/Wound Clinician					