




## Skin and Wound Product Information Sheet

<b>Flamazine</b>	
<b>Classification</b>	<b>Topical Antimicrobial: Silver</b>
<b>Key Points</b>	<ul style="list-style-type: none"> <li>• Sterile 1% silver sulfadiazine in a water-soluble base cream with no preservatives.</li> <li>• Requires a Physician/Nurse Practitioner order (pharmacy product).</li> </ul>
<b>Indications</b>	<ul style="list-style-type: none"> <li>• Use as per Physician/NP order for wounds, burns, skin grafts with signs &amp; symptoms of local infection.</li> </ul>
<b>Precautions</b>	<ul style="list-style-type: none"> <li>• For large area burn wounds and/or with prolonged application, systemic absorption of silver can cause clinical argyria (permanent dark discoloration of skin caused by overuse of medicinal silver preparations).</li> <li>• Use with caution in clients with significant hepatic or renal impairment or G-6-PD (glucose 6 phosphate dehydrogenase) deficiency.</li> <li>• Monitor WBC count for leukopenia.</li> <li>• Monitor blood glucose levels of clients using both Flamazine and oral hypoglycaemic agents as concurrent use may potentiate effects of the oral hypoglycaemic medication.</li> <li>• Monitor Phenyton (Dilantin) blood levels of clients using both Flamazine and Phenyton as concurrent use may potentiate effects of Phenyton.</li> <li>• Use with caution for clients taking Cimetidine (Tagamet).</li> <li>• Use of Flamazine and enzymatic debriding agents may cause inactivation of the enzymatic debriding agent.</li> <li>• Use of Flamazine may lead to the development of pseudo-eschar and may alter the appearance of the wound. Pseudo-eschar occurs when wound drainage and the Flamazine forms a thick yellow gelatinous covering over the wound bed.</li> </ul>
<b>Contraindications</b>	<ul style="list-style-type: none"> <li>• Do not use for clients with a sensitivity/allergy to silver.</li> <li>• Do not use for clients with sensitivity/allergy to sulfonamides (sulpha) drugs.</li> <li>• Do not use on clients who are pregnant or breast-feeding.</li> <li>• Do not use on premature infants or newborns in their first months of life.</li> </ul>
<b>Formats &amp; Sizes</b>	<p>Tube</p> <ul style="list-style-type: none"> <li>▪ 20 gm</li> <li>▪ 50 gm</li> </ul> <p>Container</p> <ul style="list-style-type: none"> <li>▪ 500 gm</li> </ul> <div style="text-align: center;">  </div>
<b>Application Directions</b>	<b>Rationale</b>
<p>Label and date container for single-client use only.</p> <p>Cleanse/irrigate the wound and peri-wound skin with sterile normal saline, or agency approved wound cleaner. Remove any loose tissue, eschar and/or blistering which is present within the wound bed.</p> <p>Dry the peri-wound skin. Apply a skin barrier to the peri-wound skin.</p>	<p>Tubes - discard after 7 days; containers – discard after 24hrs. Store at 8° to 25°C.</p> <p>Removes wound debris in preparation for dressing application.</p> <p>Protect the peri-wound skin from maceration.</p>
<b>To Apply</b>	
<p>Apply Flamazine directly to the wound bed in a 3mm to 5mm thick layer or butter onto a sterile 4x4 gauze for easier application.</p> <p>Covered with a sterile absorbent dressing or sterile gauze; it may be left open to the air.</p>	<p>Avoid applying to the surrounding skin.</p> <p>The type of cover dressing selected is dependent on the amount of exudate and the amount of intact peri-wound skin available for dressing adhesion.</p>
<b>To Remove</b>	
Gently remove dressings. Cleanse/irrigate wound with normal saline to remove any remaining cream.	



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If pseudo-eschar has developed, use normal- saline soaked gauze and gently but firmly remove it.	Pseudo-eschar will interfere with the cream’s contact/ effectiveness within the wound bed.
<b>Frequency of Dressing Change</b>	
Reapplied at least every 24 hours.	Bioavailability of silver’s antimicrobial activity is reduced at 12-24 hours post application.
<b>Expected Outcome</b>	
Signs & symptoms of local infection are resolved in 2 weeks.	
<b>For further information, please contact your Wound Clinician</b>	