








Product Information Sheet

Melgisorb Ag	
Classification	Wound Filler: Antimicrobial Alginate
British Columbia Practice	<ul style="list-style-type: none"> Dressing (sheet or ribbon) is only to be used in a <u>visible</u> wound bed, using dressing for packing of undermining/tunnelling can lead to the saturated gel pad not being fully removed from the area.
Key Points	<ul style="list-style-type: none"> A highly absorbent, non-woven, sheet composed of a high G (guluronic acid) calcium alginate and carboxymethylcellulose (CMC) which forms a gel as it absorbs wound exudate. Does not contain animal products. Contains a bactericidal ionic silver complex, effective against a broad spectrum of micro-organisms, which, in the presence of wound exudate, releases silver ions within the dressing over a 7-day period. Wounds with heavy exudate, such as those in the inflammatory phase of wound healing, will need to have the dressing changed frequently (e.g., daily, every second day) as the sheet or ribbon will quickly become a gel and be unable to absorb additional exudate. Requires a secondary (cover) dressing.
Indications	<ul style="list-style-type: none"> Superficial to deep wounds with moderate to heavy exudate. May be used under compression. Superficial and partial-thickness burns. Due to its alginate property, may assist in the control of minor bleeding in superficial wounds. Treatment of wounds with signs and symptoms (S&S) of local infection. See Wound Infection Quick Reference Guide or QR Code below. In combination with systemic antibiotics, to treat wounds with S&S of spreading infection or systemic infection. Prophylactically to prevent infection in clients at high risk for developing a wound infection.
Precautions	<ul style="list-style-type: none"> If dressing adheres to the wound, moisten with sterile normal saline prior to removal. The performance of the dressing may be impaired if used in combination with excessive use of petroleum-based products. Dressing must not come into contact with electrodes/conductive gels during ECG or EEG testing. Dressing must be removed prior to client undergoing MRI examination. Has not been evaluated on pregnant/lactating individuals or neonates/infants, consult with physician/NP prior to using on this/these population(s).
Contraindications	<ul style="list-style-type: none"> Sensitivity or allergy to silver, alginate, or other components of the dressing. Do not use on dry or lightly exuding wounds. Do not to control heavy bleeding. Do not use on surgical implantation.
Formats & Sizes	<ul style="list-style-type: none"> Sheet: <ul style="list-style-type: none"> 5 x 5 cm 10 x 10 cm 15 x 15 cm 20 x 30 cm Ribbon <ul style="list-style-type: none"> 3 x 44 cm <div style="text-align: right;">   </div>

Directions	Rationale / Key Points
Selection	
<p>Select a size of dressing that is slightly larger than the wound. If the wound is large and/or deep use a large sized sheet or more than one smaller sheet.</p> <p>Sheet may be cut. Ribbon should not be cut lengthwise, (e.g., to make a 1.5cm wide ribbon).</p> <p>Choose secondary dressing based on amount of wound exudate expected and anticipated frequency of dressing change.</p>	<p>The sheet shrinks in size as it absorbs exudate, larger sized sheet or multiple sheets will ensure deep space stays filled until next dressing change.</p> <p>Cutting the ribbon lengthwise may diminish its tensile strength and as with the sheet, the ribbon will shrink as it absorbs exudate; if the width of the ribbon is too narrow, the ribbon may fray/tear when being removed.</p>



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Directions	Rationale / Key Points	
Preparation		
<p>Cleanse wound and periwound/surrounding skin with sterile normal saline or agency approved wound cleanser.</p> <p>Dry periwound/surrounding skin.</p> <p>If required and appropriate for secondary dressing, apply barrier film to periwound skin. Refer to the Product Information Sheet for secondary dressing to determine if barrier film is appropriate.</p>	<p>See Wound Cleansing Procedure or QR Code below.</p> <p>To protect periwound skin from moisture associated skin damage and medical adhesive related skin injury. Barrier film may interfere with the function of some cover dressings, (e.g., some silicone dressings).</p>	
Application		
<p>For wounds with minimal depth (less than 1 cm): fold or cut dressing to fit the wound area.</p> <p>For wounds with <u>visible</u> depth (more than 1 cm): fill the dead space up to skin level with sheet or ribbon. May need to over-fill the space if the wound is heavily exuding.</p> <p>Ensure dressing does not overlap onto the peri-wound skin. Apply secondary dressing to cover the wound.</p>	<p>Dressing sheet or ribbon is to only be used in a <u>visible</u> wound bed, using dressing for packing of undermining/ tunnelling can lead to dressing not being fully removed from the area.</p> <p>The dressing in the presence of exudate will shrink as it becomes a gel pad, over-filling the space will ensure there is enough dressing is in the wound to fill the dead space.</p> <p>See Wound Packing Procedure or QR Code below.</p> <p>Dressing in contact with the periwound skin may cause maceration.</p>	
Removal		
<p>Gently remove the secondary dressing and remove the Melgisorb Ag from the wound. If dressing has adhered to the wound bed, soak with sterile normal saline to loosen.</p> <p>Thoroughly irrigate/cleanse to remove any remaining pieces.</p>	<p>If the dressing has adhered to the wound bed, consider another dressing as the wound exudate amount has decreased.</p>	
Frequency of Dressing Change		
<p>Dressing change frequency is based upon the amount of exudate anticipated and the type of secondary dressing used.</p> <p>Melgisorb Ag may be left in place for up to 7 days depending upon the exudate amount.</p>	<p>Daily to every second day changes may be needed for wounds in the inflammatory phase of wound healing due to the heavy exudate.</p>	
Expected Outcomes		
<p>S&S of wound infection resolved within 14 days.</p> <p>If used prophylactically, S&S of wound infection did not develop.</p> <p>Exudate is managed with no periwound maceration.</p> <p>Product performs as expected.</p>	<p>If product does not perform as expected, notify NSWOC/ Wound Clinician and then consider submitting a Supply Chain Product Concern Form.</p>	
QR Codes		
		
Wound Cleansing Procedure	Wound Packing Procedure	Wound Infection QRG
For further information please contact NSWOC/Wound Clinician		