















## Skin and Wound Product Information Sheet

Skin and Wound Product Information Sheet			
PluroGel Burn and Wound Dressing			
Category	Wound Filler – Surfactant Gel		
Key Points	removal.  • Disrupts and inhibits biofilm.  • Maintains moisture in the wound and poptimal moist wound healing environm  • Is non-cytotoxic and contains a gentle.	ftening and loosening necrotic tissue and debris for protects the wound from desiccation to provide an nent.	
Indications	Lightly to moderately draining wounds requiring a utolytic debridement or management of bi of ilm.		
Precautions	<ul> <li>Discontinue use if irritation (redness, ir</li> <li>Non-sterile for single patient use.</li> <li>Store at room temperature.</li> <li>Keep the cap tightly closed when product packaging and within 28</li> </ul>	uct not in use. Use product prior to the expiration date	
Contraindications		es or sensitivities to any of the product's components.	
Formats & Sizes	• 20g Tube • 50g Tube	Cortis  PluroGel  But need toward Creenity	
Application Directions		Rationale	
Note: PluroGel may be refrigerated prior to application to make application easier in some wounds. This method of application should only be used in consultation in NSWOC/Wound Clinician.  Cleanse/irrigate wound and periwound skin with sterile normal saline or agency approved wound cleanser. Dry periwound skin.  If required, and appropriate for the cover dressing, apply barrier film to periwound skin. Refer to the cover dressing's Product Information Sheet to determine if barrier film is appropriate.		PluroGel becomes a liquid at lower temperatures and thickens to form a gel when warmed to body temperature.  Reduces wound debris and allows for good adhesion of dressing or tape. PluroGel is compatible with all wound cleansers, including antimicrobials.  To protect peri wound 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).	
To Apply			
For all wounds: Write date of opening on tube.		Gel to be used within 28 days of opening.	
<ul> <li>Apply PluroGel following instructions below, in a thickness of:</li> <li>3 mm (approximately 2 nickels thick) for lightly draining wounds,</li> <li>5 mm for moderately draining wounds, or</li> <li>5 mm for all wounds if dressing is not being changed daily.</li> </ul>		Optimal results can be achieved if the thickness of the gel applied correlates with the amount of exudate and dressing change frequency.	
<ul> <li>Ensuring sterility of the tip of the tube, apply PluroGel directly to wound bed using either a dry or saline-moistened sterile applicator (e.g., tongue depressor or cotton tipped applicator). Apply and secure appropriate secondary (cover) dressing.         <ul> <li>OR</li> </ul> </li> <li>Ensuring sterility of the tip of the tube, apply PluroGel onto a</li> </ul>		Gel will slide off saline-moistened applicator more easily than dry applicator.  The choice of secondary (cover) dressing is dependent on the amount of wound exudate expected and anticipated frequency of dressing change.  'Buttering' the gel onto the cover dressing may be	

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Product performs as expected.

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secondary (cover) dressing and place dressing on wound so	helpful when the wound bed is very moist making it is
that PluroGel is in direct contact with the wound bed.	difficult to spread the gel.
PluroGel will not harm periwound skin.	, ,
For wounds with depth, undermining/sinuses/tunnels:  • Ensuring sterility of the tip of the tube, a pply PluroGel directly to wound bed using either a dry, or salinemoistened, sterile applicator (e.g., tongue depressor or cotton tipped applicator). Lightly fill/pack area(s) with saline moistened gauze or other wound filler. If using a rope filler, leave a tail of the rope so that it can easily be seen and removed. Apply and secure secondary (cover) dressing. Write the number of pieces of packing inserted into the wound on dressing and document in chart.	Gel will slide off saline-moistened applicator more easily than dry applicator.  The choice of secondary (cover) dressing is dependent on the amount of wound exudate expected and anticipated frequency of dressing change.
<ul> <li>OR</li> <li>Ensuring sterility of the tip of the tube, apply PluroGel directly onto saline-moistened gauze or other wound filler using a sterile applicator (e.g., tongue depressor or cotton tipped applicator) or sterile gloves. Lightly fill/pack area(s)</li> </ul>	'Buttering' the gel onto the packing pieces is helpful when the wound bed is either very moist making it is difficult to spread the gel, and / or to ensure Plurogel is applied to undermining/sinus/tunnel areas.
with the wound fillers o that PluroGel is in direct contact with the wound bed. If using a rope filler, leave a tail so that the rope can easily be seen and removed. Apply and secure secondary (cover) dressing. Write the number of pieces inserted into the wound on dressing and document in chart.	The choice of secondary (cover) dressing is dependent on the amount of wound exudate expected and anticipated frequency of dressing change.
To Remove	
Remove dressing and any packing material used.	Ensure all packing pieces are removed from wound
The move are essing and any pasting material assets	according to number recorded on secondary (cover) dressing and in chart.
Cleanse/irrigate wound thoroughly with sterile normal saline or agency approved wound cleanser to remove any remaining PluroGel and wound debris.	PluroGel is water-soluble and compatible with all wound cleansers.
Use gauze moistened with saline, water or wound cleanser to cleanse periwounds kin.	Dried PluroGel will a ppear as a white residue on periwoundskin.
Frequency of Dressing Change	
For optimal results, apply PluroGel daily, especially for the first 2 weeks.	
When dressing frequency is changed to either every 2 or 3 days, ensure the gel is a pplied 5 mm thick.	Dressing is to be changed every 2 -3 days to manage exudate and maintain a moist wound environment.
Expected Outcome	
Wound bed is clean and comprised of granulation tissue.	If product does not perform as expected. notify NSWOC/Wound Clinician and consider submitting a

For further information, please contact: NSWOC or Wound Clinician

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Product Concern form.