


Developed by the British Columbia Provincial Nursing Skin & Wound Committee in collaboration with NSWOCs/ Wound Clinicians from:	
	
Title	Procedure: NPWT Dressing Application - Prevena Peel & Place
Document Indications for Use	This Negative Pressure Wound Therapy (NPWT) dressing procedure is used with the 3M/KCI Prevena Peel & Place dressing and the disposable Prevena125 machine in conjunction with the Guideline: Negative Pressure Wound Therapy (Reusable/Disposable) for Adults & Children .
British Columbia Practice Level	<ul style="list-style-type: none"> In order to carry out NPWT, Registered Nurses (RNs), Registered Psychiatric Nurses (RPNs), and Licenced Practical Nurses (LPNs), in accordance with the British Columbia College of Nurses and Midwives' scope of practice for their specific designation, must: <ul style="list-style-type: none"> Have Health Authority (HA) and/or agency policy in place to support their designation in providing NPWT. Have a HA approved NPWT decision support guideline. Successfully complete the additional education for monitoring/managing the NPWT system. Successfully complete additional education for NPWT dressing application. Have client specific NPWT orders from a Physician/NP/NSWOC/Wound Clinician. For LPNs, follow an established NPWT wound treatment plan. Clients undergoing NPWT require an interprofessional approach to provide comprehensive, evidence-based assessment and treatment.
Background	<p>Prevena Peel & Place is a dressing used with the disposable 7-day Prevena125 machine (same machine as for the Prevena Customizable dressing) which supports the management of closed incisions (stapled or sutured) in clients at risk for developing post-operative incisional dehiscence due to clinical status, elevated BMI, diabetes, and immunosuppression:</p> <ul style="list-style-type: none"> Dressing designed for single, short, linear incisions with a length less than 35 cm. The dressing is a composite of purple foam with an ionic silver (0.019%) interface layer used to reduce microbial colonization in the dressing; the silver does not treat infection. The machine's settings are pre-set; Pressure Setting: 125 mmHg, Therapy Setting: Continuous. Canister holds 45 mL of exudate; the dressing can be connected to either a VACUta4 or an ActiVAC machine if the expected exudate amount is anticipated to moderate/large. The first dressing is <i>usually</i> applied in the Operating Room (OR) by the surgical team and remains in place for a minimum of 2 days to a maximum of 7 days. May be used over sutures or staples but not large retention sutures. If surgical glue is used as the closure method, then check the directions for application as some glues should not be covered with a dressing. Steri-strips are not needed; the dressing will splint the incision line. When the machine has completed its 7-day therapy, the dressing is to be removed. As per orders, the incision line is either left open to air, covered with a dressing or if needed, another Prevena 7-day therapy is started. For disposal, the machine batteries and the machine should be recycled as electrical or electronic equipment. <p>General Safety Considerations NPWT Medical Device</p> <ul style="list-style-type: none"> Defibrillation: when defibrillation is required in the area of the NPWT dressing, remove the dressing or place the paddles in an alternate position; ensure that the NPWT machine is at least 2 meters away from the paddles. Electrodes or Conductive Gel: do not place EKG or other electrodes/conductive gels in contact with the NPWT dressing/machine. Magnetic Resonance Imaging (MRI) environment: <ul style="list-style-type: none"> The NPWT machine itself cannot go into the MRI environment. If a canister is present, disconnect it from the machine and ensure that all tubing clamps are open to allow any exudate to flow into the canister. If the NPWT dressing (interface and/or foam) does not contain silver, then the dressing may remain in place. If the MRI is to be done in the area of the wound, consult Radiology Department regarding the need to remove the dressing. If the NPWT dressing is comprised of a silver-based interface or Granufoam Silver foam or is a Prevena dressing, consult with the MRI Radiology Department; depending upon the MRI magnetic field environment, the silver-based dressing may need to be removed.

Note: This is a **controlled** document. A printed copy may not reflect the current, electronic version on the CLWK Intranet. Any document appearing in paper form should always be checked against the electronic version prior to use; the electronic version is always the current version. This DST has been prepared as a guide to assist/support practice for staff working in British Columbia; it is not a substitute for proper training, experience & exercising of professional judgment

	<ul style="list-style-type: none"> Diagnostic Imaging: Silver-based interfaces, Granufoam Silver foam or Prevena dressings may impair visualization with certain imaging modalities; consult with the Radiology Department regarding the need to remove the dressing. Hyperbaric Oxygen Chamber environment: the NPWT dressing should be removed and a different type of dressing used for the duration of the HBO treatment period. Cell phones or similar products could affect the NPWT machine; move the NPWT machine away 2 meters (6.5 feet) away from the machine if interference is suspected. Do not connect NPWT dressings to wall suction.
Bookmarks	Equipment and Supplies Procedure: Applying / Reapplying a NPWT Prevena 'Peel & Place' Dressing Procedure: Removing a NPWT Prevena 'Peel & Place' Dressing Procedure: Changing a Prevena125 Canister Managing Prevena125 Alerts/Alarms Client Showering Transition/Discharge Planning Client/Family Education and Resources Documentation Bibliography/References Document Creation
Related Documents	Guideline: Negative Pressure Wound Therapy (Reusable/Disposable) for Adults & Children Guideline: Wound Management for Adults & Children Procedure: Wound Cleansing Procedure: Wound Packing Additional Education Requirements/Competencies: NPWT Monitoring/Managing E-Learning Module: NPWT Monitoring Managing Additional Education Requirements/Competencies: NPWT Dressing Application (under development) E-Learning Module: NPWT Dressing Application (under development) Documentation Tool: NPWT Safety/Monitoring Check Flow Sheet Client Health Education Resource (CHER): NPWT Prevena125 Self Care Client Health Education Resource (CHER): NPWT Prevena125 CHN

Equipment and Supplies

Dressing Kit:

The kit is supplied with either a 13 cm, 20 cm or 35 cm dressing. When choosing dressing size, add an additional 2 cm to the overall incision length. Consider expected exudate and if needed, dressing may be connected to a VACUltra4 or ActiVAC machine.

- Prevena125 Therapy machine supplied with 3 non-rechargeable AA batteries (in the machine)
- Foam dressing (purple) with SensaT.R.A.C. pad/tubing
- 45 mL canister (replacement canister may be ordered separately)

Dressing Change Supplies:


- Personal protective equipment (i.e., safety glasses, gloves, gown, and mask as required)
- Dressing tray x 1
- Sterile normal saline at least 100 mL and at room temperature
- Sterile gloves - 1 pair
- Clean gloves - 1 pair
- Alcohol swab(s), if needed
- Procedure pad(s)
- Skin film barrier wipe
- Marker
- Camera if required


Additional Supplies

- Additional supplies as detailed on the Pre-Printed Order (PPO) or in the written care plan.
- Adhesive remover
- Hydrocolloid or extra transparent film drape

Note: This is a **controlled** document. A printed copy may not reflect the current, electronic version on the CLWK Intranet. Any document appearing in paper form should always be checked against the electronic version prior to use; the electronic version is always the current version. This DST has been prepared as a guide to assist/support practice for staff working in British Columbia; it is not a substitute for proper training, experience & exercising of professional judgment



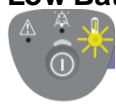

Procedure: Applying / Reapplying a NPWT Prevena Peel & Place Dressing	
Click here for the Procedure: Removing a Prevena Peel & Place Dressing	
Steps	Key Points
1. Review the Orders. <ul style="list-style-type: none"> • Read the NPWT order and overall care plan. • Review allergies/sensitivities for ionic silver or acrylic adhesives/products. 	The transparent drape has an acrylic adhesive coating and the dressing has an ionic silver interface which may present a risk of an adverse reaction in clients who are allergic or hypersensitive to either of these products.
2. Prepare the client: <ul style="list-style-type: none"> • Assess client's pain/anxiety for appropriate medication required; allow medication to take effect. • Position the client for the procedure. 	The client undergoing NPWT may experience pain and anxiety. Provide pain management strategies, medication, education, reassurance and position for comfort.
3. Set-up for the procedure: <ul style="list-style-type: none"> • Gather the supplies. • Perform hand hygiene; put on clean gloves. • Set up the sterile dressing tray. Add any additional supplies. • Ensure a marker is available and place outside the sterile field. • Take down/remove the current dressing. 	Perform hand hygiene to avoid contamination. Add all sterile supplies to sterile field. If using ostomy rings, please note these are not sterile and should be added to the perimeter or edge of the sterile field.
4. Clip peri-wound/surrounding skin hair, if needed: <ul style="list-style-type: none"> • Using scissors or clippers, clip the hair in the area where the dressing is to be applied. Clip as close to the skin surface as possible. • Avoid shaving whenever possible. 	Hair can make it difficult to achieve an airtight seal and may cause pain during drape removal. Shaving is not recommended as this can cause skin irritation and may lead to folliculitis but, if needed, then shave in the direction of the hair follicles.
5. Assess and cleanse the incision: <ul style="list-style-type: none"> • Cleanse the incision and peri-incisional skin with Normal Saline or as per the Surgeon's order. • Complete a full incision assessment. • If this is a dressing reapplication, determine appropriateness of ongoing NPWT and if there are any concerns, e.g. the incision has deteriorated, notify the Surgeon. 	Cleansing the incision and peri-skin ensures all loose hair is removed and not retained in the incision. Cleansing the incision aids in removal of dry exudate. Assessment results are compared to previous assessment to ensure that the incision is healing.
6. Prepare the peri-skin and surrounding skin: <ul style="list-style-type: none"> ○ Use sterile forceps to apply skin barrier wipe to the peri-skin and surrounding skin, let dry. <p>The step may be done now, wearing clean gloves, or later once the transition to sterile gloves is complete.</p>	Skin barrier film wipe protects the skin from adhesives, helps to maintain an airtight seal and may extend the wear time of the dressing. If the client/wound situation requires sterile technique for all aspects of the dressing then prepare the peri-skin once sterile gloves are donned; otherwise can be done at this point.
7. Transition to sterile technique: <ul style="list-style-type: none"> • Remove clean gloves; perform hand hygiene. • Take photos for documentation, if required. • Open the NPWT Peel & Place dressing kit and place the contents on the sterile field. • Perform hand hygiene. Apply sterile gloves for the remainder of the procedure. 	Instruments used to clean the incision are no longer sterile and therefore not used to aid in the activities used.
8. Prepare the peri-incisional skin and surrounding skin if not already prepared in Step 6.	

Steps	Key Points								
<p>9. Prepare and apply the dressing:</p> <ul style="list-style-type: none"> • Orientate the dressing to eliminate sharp bends in the dressing tubing. • Remove the central backing on the dressing and position it centrally over the incision line. • Remove the rest of the dressing backings and the top layer (white paper) • Lay the dressing down over the incision. Do not stretch the drape edges. • Press the dressing and its border into place to ensure an airtight seal. If needed, cut and apply additional pieces of film drape. 	<p>Ensure the dressing and transparent drape edges do not cover body orifices, stomas, or drain openings. If ostomy present, apply Prevena dressing and then the ostomy applicant.</p> <p>Applying stretched film drape can lead to blistering over the peri-incisional area.</p> <p>Circumferential Dressing Risk: Avoid applying the drape in a complete ring around a foot or limb.</p> <p>Adding an additional small border of drape may extend the dressing wear time.</p>								
<p>10. Prepare the NPWT canister:</p> <ul style="list-style-type: none"> • Insert canister into the machine until a click is heard, the side tabs are to be flush to the machine. • Connect the SensaTRAC pad tubing to the canister tubing. 	<p>For wounds with large exudate, the dressing may be connected to VACUIta4 or ActiVAC. Use the Procedure: NPWT Reusable Dressing Application - VACUIta4 or ActiVAC for the canister insertion and for the step to start the therapy.</p>								
<p>11. Start the NPWT therapy:</p> <ul style="list-style-type: none"> • The 3AA lithium batteries are in the machine. • Hold the power ON/OFF button for 2 seconds to start the therapy. An audible beep and green light over the ON/OFF button will confirm the therapy is on. • Hold the ON/OFF button for 5 seconds to turn the machine OFF. Press the ON/OFF once to mute any alarms. 	<p>The Prevena125 Therapy machine is pre-set to 125 mmHg Pressure Setting and Continuous Therapy Setting.</p> <div style="display: flex; align-items: center;">  <table border="1" data-bbox="1149 930 1421 1108" style="margin-left: 20px;"> <tr> <td></td> <td>ON/OFF Button Audio Pause/Mute Button</td> </tr> <tr> <td></td> <td>Caution Light</td> </tr> <tr> <td></td> <td>Audio Pause/Mute Light</td> </tr> <tr> <td></td> <td>Low Battery Light</td> </tr> </table> </div>		ON/OFF Button Audio Pause/Mute Button		Caution Light		Audio Pause/Mute Light		Low Battery Light
	ON/OFF Button Audio Pause/Mute Button								
	Caution Light								
	Audio Pause/Mute Light								
	Low Battery Light								
<p>12. Assess for an airtight seal:</p> <ul style="list-style-type: none"> • With an airtight seal the dressing will collapse and have a wrinkled appearance, be firm to the touch and no hissing sounds heard. • If this is not the case, gently press all areas of the dressing and drape to achieve a seal. • If still leaking, apply additional strips of drape. • To ensure proper application or that the leak is properly fixed use the VisiCheck Feature: double press the ON/OFF button to see the leak rate status (displayed for 3 seconds) <ul style="list-style-type: none"> ○ 1 light = Best ○ 2 lights = Good ○ 3 lights = Marginal 	<p>If it does not collapse in less than 1 minute, there may be a dressing leak or tubing blockage.</p> <p>An alarm will sound if the canister/tubing connection is not secure.</p> <p>If unable to get an airtight seal see Managing Prevena125 Therapy Alerts</p>								
<p>13. Clean up workspace:</p> <ul style="list-style-type: none"> • Discard dressing tray/disposable scissors. • Remove gloves; perform hand hygiene. • Place the Prevena connector in a clean sealable plastic bag for future use if needed. 									
<p>14. Use the marker to write the date on the canister.</p>	<p>Date the canister and change at least every 7 days.</p>								


Steps	Key Points
15. Conduct the first Safety/Monitoring Check: <ul style="list-style-type: none"> • Check the system from the dressing to the power source. • Assess colour, movement, warmth, sensation distal to the dressing if NPWT on a limb. • Tubing may be a fall risk, secure if needed. 	 <p>Green light indicates machine is ON</p> <p>Plug the machine in to re-charge the batteries.</p>

Procedure: Removing a NPWT Prevena ‘Peel & Place’ Dressing	
Steps	Key Points
1. Review the Chart: <ul style="list-style-type: none"> • Read NPWT orders and overall care plan. 	
2. Prepare the client: 9. Assess client’s pain for appropriate medications and allow time for the medication to take effect.	The client undergoing NPWT may experience pain and anxiety. Provide pain management strategies, medications, and reassurance.
3. Prepare for the procedure: <ul style="list-style-type: none"> • Gather supplies to remove the NPWT dressing. • Position the client for the procedure. • Perform hand hygiene; put on clean gloves. • Set up a sterile dressing tray. 	See Equipment and Supplies list.
4. Remove the dressing: <ul style="list-style-type: none"> • Ensure NPWT machine is OFF. • Starting at one end of the incision line, use a gloved hand to anchor the film drape edge, with the other hand gently stretch the drape horizontally away from the incision line. • Slowly lift the drape away from the skin. • Discard the dressing. 	If removing the dressing at the completion of the 7-day therapy, the machine will have automatically shut itself off. If removing the dressing, in the midst of the 7-day therapy, the machine will have to be manually turned off. Remove NPWT incisional dressing as soon as the machine is turned off, it does not need the 30 minutes ‘rest time’ as with NPWT wounds dressings. A peeling motion can cause epidermal stripping and irritates the peri-skin and surrounding skin.
5. Remove gloves and perform hand hygiene.	
6. Apply an alternative dressing as per Surgeon’s order. If reapplying Prevena dressing see Procedure: Applying/Reapplying NPWT Prevena Peel & Place Dressing	Remove the batteries from the Prevena machine and recycled where possible; the machine should be recycled as electrical/electronic equipment

Procedure: Changing a Prevena125 Therapy Canister	
Steps	Key Points
<ul style="list-style-type: none"> Gather supplies: <ul style="list-style-type: none"> New sterile canister (45mL) Alcohol swab x1 Clean gloves Wash hands and don gloves. Turn the therapy OFF; hold the ON/OFF button for 5 seconds. Press side tabs on canister to remove the full canister. Cleanse tubing connector site with the alcohol swab for 30+ seconds. Allow to dry for 30+ seconds. Disconnect canister tubing from dressing tubing. Connect dressing tubing to new canister tubing. Install new canister into the machine. A distinct click will be heard when the canister is in place. Turn therapy ON; hold ON/OFF button for 2 seconds. Date the canister. 	<p>Canister is to be changed when it is noted to be full or when the solid yellow light, the blockage symbol comes on with an audible beep which repeats every 15 seconds.</p> <p>The alarm may be muted: press the ON/OFF button</p> <p>When the canister is changed, the audible and visual alarms will turn off.</p> <p>Canister is fully inserted with the side tabs are flush with the body of the machine.</p>

Managing Prevena125 Alerts	
<p>NOTE: Any of the beep alerts can be muted by pressing the ON/OFF button once; this will mute the beeping for up to 60 minutes. The yellow Audio Paused Light will show until issue is corrected.</p>	
	
Alerts	Monitor/Manage
<p>Therapy Complete: Therapy is complete at 8 days or 192 hours. All 3 yellow lights will come on and a 15 second beep will be heard; the machine will then stop working.</p>	<p>Monitor/check for the 3 yellow lights.</p> 
<p>Low Battery:</p>  <ul style="list-style-type: none"> Low – a slow beep and a solid yellow light; change batteries within 6 hours. Critical – a rapid beep increasing in volume and one solid yellow light; change batteries immediately. 	<p>Change the 3 AA batteries:</p> <ul style="list-style-type: none"> Press/hold the ON/OFF button for 5 seconds to turn OFF the machine and stop its life cycle counter. Slide open the battery cover located on the back of the machine. Insert new batteries; close battery cover. Press/hold the ON/OFF button for 2 seconds; this will re-start the machine and its life cycle counter.
<p>Canister Full:</p>  <p>2 beeps and one solid yellow light.</p>	<p>See Procedure: Changing the Prevena125 Canister</p>

Continued on next page

Alerts	Monitor/Manage
<p>Air Leak:</p>  <p>1 beep with one solid yellow light.</p> <p>VisiCheck Feature: To ensure proper application or that the leak is properly fixed, double press the ON/OFF button to see the leak rate status (displayed for 3 seconds)</p> <ul style="list-style-type: none"> ○ 1 light = Best ○ 2 lights = Good ○ 3 lights = Marginal 	<p>Ensure tubing connection is tight.</p> <p>Ensure the canister is properly installed.</p> <p>Fix the air leak:</p> <ul style="list-style-type: none"> ● Ensure the machine is ON. ● Press along the edges of the dressing to find areas which seem loose or have lifted. Fix the leaks by covering them with the Prevena patch strips or small strips of transparent film dressing. ● When the leak is resolved the audible leak alert will stop and visual alert will turn off. ● If the air leak is not resolved then the yellow light will come back on and the beep will start; try again to re-seal the air leak.
<p>Machine Failure: One beep repeating and increasing in volume; 2 solid yellow lights come on then all of the lights go OFF.</p>	<ul style="list-style-type: none"> ● Try turning the machine back ON. ● Try replacing the 3 AA batteries. ● If unable to restart the NPWT within 2 hours : <ul style="list-style-type: none"> ○ Remove the current dressing and apply a new Prevena dressing or alternative dressing as per order. ○ Notify Prescriber of the situation.
<p>3M/KCI Customer Service: Phone: 1-800-668-5403</p>	

Client Showering
<p>Showering/tub bathing should wait until the Prevena 125 dressing has been discontinued to avoid disturbing the dressing. Client may have a sponge bath.</p>

Transition/Discharge Planning Refer to [Guideline Negative Pressure Wound Therapy for Adults & Children](#)

- For transition between an acute site to another acute care site
- For transition between an acute care site to community care
- For transition between an acute care site to long-term care
- For transition between a community care site or a long-term care site to an acute care site

Client/Family Education and Resources

1. Acute Care:

- a. When NPWT is started, teach patient/family the rationale for and the underlying principles of NPWT, as well as, general information regarding the Prevena125 Therapy machine being used.
- b. Prior to discharging the day-surgery client home:
 - Review the [Client Health Education Resource: NPWT Prevena125 Self Care](#) which outlines the frequently asked NPWT related questions and specific Prevena125 machine details e.g. the management of alerts/alarms, changing the canister to ensure that the client will be able to manage on their own at home.
 - Identify which method the patient is to use to manage an irreparable dressing leak and put together the client's Trouble-Shooting Supplies bag.

Note: This is a **controlled** document. A printed copy may not reflect the current, electronic version on the CLWK Intranet. Any document appearing in paper form should always be checked against the electronic version prior to use; the electronic version is always the current version. This DST has been prepared as a guide to assist/support practice for staff working in British Columbia; it is not a substitute for proper training, experience & exercising of professional judgment

- c. Prior to transition of care to Community (home/Ambulatory Care Clinic):
 - Review the [Client Health Education Resource: NPWT Prevena125 CHN](#) which outlines the frequently asked NPWT related questions and specific Prevena125 machine details e.g. the management of alerts/alarms, changing the canister.
 - Identify which method the patient is to use to manage an irreparable dressing leak and put together the client's Trouble-Shooting Supplies bag.
2. Community Care:
 - a. When the client is transitioned from Acute Care with NPWT in place or when the NPWT is started at home/ambulatory clinic, teach/reinforce with client/family the rationale and underlying principles of NPWT, as well as, review the frequently asked NPWT related questions and specific information regarding the Prevena125 machine being used, e.g. the management of alerts/alarms, changing the canister; see [Client Health Education Resource: NPWT Prevena125 CHN](#).
 - Review/identify the method that the client is to use to manage an irreparable dressing leak. Ensure that client has a Trouble-Shooting Supplies bag.
3. Long Term Care:
 - a. When the resident is received back from Acute Care with NPWT in place or when NPWT is started within the long-term care site, teach/reinforce with client/family the rationale for and the underlying principles of NPWT, as well as, general information regarding the Prevena125 Therapy machine being used.

Documentation

1. With each Prevena Peel & Place NPWT dressing change, document on the appropriate paper or electronic documentation tool, as per agency policy, and include the following:
 - The incisional assessment
 - Document the client's response to the dressing change.
2. Document NPWT clinical outcomes and care plan revisions as they occur.
3. For Acute Care & Long Term Care, document safety/monitoring checks on the [NPWT Safety/Monitoring Check Flow Sheet](#).
4. For Acute Care & Long Term Care, document canister fluid volume; use the Fluid Balance (In/Out) flow sheets as per unit policy.
5. Document client/family teaching provided on transition of care and the Trouble Shooting Kit supplies given to client/ family on transition to the community setting.
6. When a Prevena Peel & Place NPWT dressing is applied/changed in the Operating Room (OR), the following is documented in the OR record:
 - NPWT type: Closed Incision
 - Note: packing count not needed as the dressing goes over a closed incision.
7. Report NPWT adverse events in the Patient Safety Learning System, or report the safety event according to Health Authority or agency guidelines.

Bibliography/References

1. Refer to the [Negative Pressure Wound Therapy for Adults & Children Guideline](#) for the master list of references.
2. KCI (An Acelity Company). (2019). Prevena 125 Therapy Unit with Prevena 45ml Canister and Accessories Instructions For Use. Retrieved from <https://www.acelity.com/healthcare-professionals/instructions-for-use?country=united-states&language=english>. Drawings adapted from same.
3. KCI (An Acelity Company). (2019). Prevena Plus 125 Therapy Unit Patient Guide. <https://www.acelity.com/-/media/Project/Acelity/Acelity-Base-Sites/shared/PDF/prevena-125-therapy-unit-patient-guide.pdf/#EN>. Drawings adapted from same.

Document Creation

This guideline is based on the best information available at the time it was published and relies on evidence and avoids opinion-based statements where possible. It was developed by the Provincial Nursing Skin & Wound Committee and has undergone provincial stakeholder review.

Created By	British Columbia Provincial Nursing Skin & Wound Committee in collaboration with NSWOCs/ Wound Clinicians from across all Health Authorities.
Publication Date	July 2019
Revision Date(s)	January 2020, May 2020, January 2021, March 2022
Review Date(s)	