















Skin and Wound Product Information Sheet

Silvasorb		
Classification Antimicrobial: Silver		
Key Points	Ionic silver suspended in a hydrogel base	
	Slow release of silver over 3 days	
Indications	• For wounds with small amount of exudate which show signs and symptoms (S&S) of local	
	wound infection	
Precautions	Avoid putting electrodes or conductive gels in contact with silver products	
Contraindications	Do not use for clients with a known sensitivity or allergy to silver	
	Do not use for wounds with moderate to large amounts of exudate	
	Do not use silver products in combination with oil-based products such as petrolatum or	
	paraffin	
		is undergoing MRI examination or during radiation
therapy (dressing can be replaced after MRI or radiation treatment is completed)		r MRI or radiation treatment is completed)
Formats & Sizes	• Tube	EN ALEPSO MI
	■ 7.4 ml	
	■ 44.4 ml	
	■ 88.8 ml ■ 236 ml	
	- 250 mi	
	■ 474 ml	480
Ann	lication Directions	Rationale
Cleanse/irrigate wound with sterile normal saline or agency		Reduces wound debris and allows for adhesion of
approved wound cleanser; dry peri-wound skin		dressing or tape.
If required, apply a skin sealant to the peri-wound skin.		To protect the peri-wound skin from maceration and
		to improve the adhesion of the dressing or tape.
To Apply		
Remove the cap ensuring sterility is maintained. Peel the seal off		
the opening of the tube to access the gel on initial use.		
Apply a 3 mm layer of gel to the wound bed using a sterile Q-tip.		Excess gel can cause maceration.
Cavity wounds: Spread the gal entering piece of appropriate		NA/III bala kaan naskina makatan it daas nat duu sut
Cavity wounds: Spread the gel onto <u>one</u> piece of appropriate packing (gauze) and insert into the cavity.		Will help keep packing moist so it does not dry out and adhere to the wound bed.
packing (gauze) and insert into the cavity.		and adhere to the would bed.
Packing: Moisten one (where possible) gauze packing strip with		Over packing undermining or sinus tracts can lead to
normal saline and wring out well; then moisten the gauze with		tissue necrosis. The tail will facilitate the removal of
Silvasorb gel. Lightly fill undermining or sinus tract with the		packing.
prepared gauze. Leave a tail of the ribbon so that it can easily be		
seen.	,	
Apply appropriate cover dressing to maintain a moisture-		The choice of cover dressing is depended upon the
balanced wound environment.		amount of exudate expected.
To Remove		
Gently remove packing. if used. Cleanse to remove remaining gel.		To avoid trauma to the wound bed.
Frequency of Dressing Change		
Will depend upon the amount of exudate. Silver gel provides		
sustained antimicrobial release for up to 3 days. Change the		
cover dressing as required.		
Expected Outcome		
S&S of local wound infection are resolved within 2 weeks.		
For further information, please contact your Wound Clinician.		