OPSITE◊ POST-OP Dressing

Allows visibility of the wound which may reduce the need for unnecessary dressing changes[1,2]



A low allergy dressing to help minimise the risk of post-operative blistering.[1-3]



Smith+Nephew

OPSITE◊
POST-OP VISIBLE
Waterproof, Bacteria-proof Dressing with See-through Absorbent Pad

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The innovative design of OPSITE◊ POST-OP VISIBLE Dressing combines visibility with a bacteria-proof film[5-7] and an absorbent pad to help ensure the wound is protected.[4]

Features and benefits

Patient focused

OPSITE POST-OP VISIBLE Dressing is comprised of a waterproof film, allowing the patient to stay clean and shower with the dressing in place.[4]

Low pain on removal[1,8]

OPSITE POST-OP VISIBLE Dressing is a conformable[2,9] post-operative dressing which has been shown to have low pain on removal.[1,8]

Helps minimise the risk of post-op blistering[2,9]

OPSITE POST-OP VISIBLE Dressing has a triple-layer construction composed of a low allergy adhesive[3] wound contact layer, a lattice see-through foam pad and a moisture responsive waterproof film.[4]

Effective management of post-operative wounds

1. Exudate management

OPSITE POST-OP VISIBLE Dressing is composed of a low adherent, absorbent foam pad which reduces the risk of skin maceration by keeping the exudate away from the peri-wound area.[1,4,8]

2. Continual monitoring

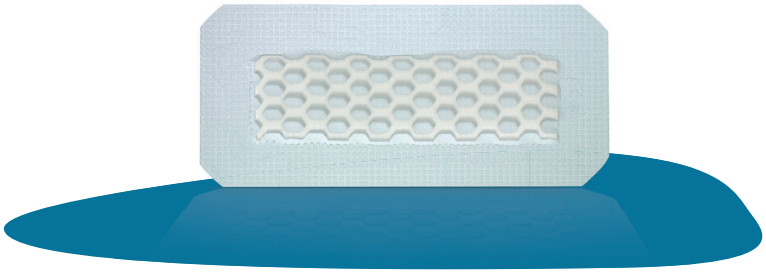
OPSITE POST-OP VISIBLE Dressing allows health care professionals (HCPs) to visibly monitor the wound through the lattice see-through foam pad. This may help reduce unnecessary dressing changes for patients.[1,2]

3. Moisture responsive film[4]

The moisture responsive film allows excess moisture to evaporate through the dressing, while maintaining a moist wound environment conducive to healing.[4]

4. Bacterial barrier[1,5-7]

The top film may act as a barrier to bacteria, including Meticillin-resistant *Staphylococcus Aureus* (MRSA)[4] helping to aid in the prevention of bacterial contamination.[1,5-7]



OPSITE POST-OP VISIBLE Dressing

S+N Code	Size	Carton
66800136	10cm x 8cm	20
66800137	15cm x 10cm	20
66800138	20cm x 10cm	20
66800139	25cm x 10cm	20
66800140	30cm x 10cm	20
66800141	35cm x 10cm	20

Indications

To dress acute wounds such as:

- post-operative wounds
- lacerations
- cuts
- abrasions
- minor burns where levels of exudate are low / moderate

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For detailed product information, including indications for use, contraindications, precautions and warnings, please consult the product's applicable Instructions for Use (IFU) prior to use.

References

1. O'brien G, Buckley K, Vanwalleghem G, *et al.* A multi-centre, prospective, clinical inmarket evaluation to assess the performance of OPSITE POST-OP Visible dressings. *International Wound Journal.* 2010;7(5):329-337. **2.** Arroyo AA, Casanova PL, Soriano JV, Torra I Bou J-E. Open-label clinical trial comparing the clinical and economic effectiveness of using a polyurethane film surgical dressing with gauze surgical dressings in the care of post-operative surgical wounds. *International Wound Journal.* 2015;12:285-292. **3.** Internal report 2018. Low allergy adhesive claims support for OPSITE POST-OP Visible. PSS306. **4.** Smith & Nephew 2018. OPSITE POST-OP Visible Dressing physical properties. Internal report. DS/18/368/R. **5.** Smith & Nephew 2003. Bacterial barrier testing of IV3000°. Internal report. WRPTW042-281. **6.** Internal report 2006. An *In-vitro* assessment of the Bacterial Barrier properties of ALLEVYN° ADHESIVE. 0607022. **7.** Internal report 2005. Bacterial barrier properties of OPSITE POST-OP Film against Methicillin-Resistant *Staphylococcus Aureus* (MRSA). 0505004. **8.** Smith & Nephew 2012. A prospective, open, randomised controlled trial to compare OPSITE POST-OP Visible wound dressings with standard therapy in the treatment of surgical incisions. Internal report. CSR/CT10/02. **9.** Byrne-Murphy S. A prospective evaluation of a new dressing OPSITE POST-OP Visible on post op blistering following total hip and knee replacement. Paper presented at: Wounds UK; 2009; Harrogate, UK. CSR/CT10/02.