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Guidance for use

This clinical evaluation report is aimed primarily at the NHS and all those working to support patient care.

Please note that the product assessment results should only be read and used in conjunction with the full text of this clinical review.

1. Introduction

The NHS Clinical Evaluation Team was established in April 2016. The team's remit was to add independent clinical review to 'everyday healthcare consumables' used by the NHS.

Everyday healthcare consumables are products found in the majority of wards, clinics, health centres, treatment rooms and community nurses' bags across the NHS. The purpose of this report is two-fold: firstly, to provide a clinical assessment of the usability and requirements from the NHS for Intravenous Vapour Permeable Film Dressings (IV film dressings). The second part of this report will focus on dressings used to protect and secure Central Venous Access Devices (CVAD) in adults which are available to the NHS from the national procurement provider. Secondly, to provide a clinical statement of desired functions and properties that the NHS requires of an IV film dressing used to secure CVADs in adults, for use in future procurement activities. The use of or efficacy of gauze and tape as an alternative securement device for CVAD will not be discussed in this report.

It is clear from the evidence that IV film dressings, featured in this report, are everyday healthcare consumables that are found in most clinics or ward settings and would certainly be items included in any stock list when setting up a new clinical service. On that basis, the project was approved by the Clinical Reference Board culminating in the production of this report for their approval in September 2018.

Based on 2016 data supplied by NHS Supply Chain, the NHS is spending approximately £10.8 million per annum on IV film dressings to secure intravenous devices. This report covers the range of products available as of May 2017. The framework lists 8 different suppliers, all offering a variety of products which are advertised as being suitable as an IV films securement of a CVAD in an adult.

From Part 1 of this report, intelligence about IV film dressings was initially gathered from a variety of sources to provide background information on the current evidence available to support the way the products are designed and clinically evaluated.

Subsequently, clinical engagement sessions were held with frontline NHS Clinicians as well expert practitioners in the field of vascular access and IV therapy, with the aim of identifying important clinical features to which they believe is paramount for IV film dressings. This information was used to develop clinical criteria for IV film dressings, against which all brands available from the national procurement provider were reviewed.

Findings from these clinical reviews have been collated into a product assessment report to allow users to identify products and see how they performed against the agreed clinical criteria.

A more detailed description of the team and our pathway approach can be found in the NHS Clinical Evaluation Team operating manual which can be found on our website at: www.supplychain.nhs.uk/CET

2. Clinical Context

2.1 Clinical Definition and Scope

This series of clinical reviews will form the second part of the whole report on intravenous (IV) film dressings used to secure vascular access devices (VAD).

Intravenous vapour permeable adhesive film dressings, more commonly referred to as "IV film dressings" are thin sheets of transparent polyurethane (polymer) films, with one side coated in a continuous adhesive layer. Transparent films are waterproof and impermeable to bacteria and contaminants. These dressings do not have the ability to absorb fluid however; they are permeable to moisture, i.e. facilitating excess moisture vapour away from insertion site. Furthermore, they are commonly used for wound management, skin protection and to secure external devices to the skin. (Classification of Medical Devices, June 2010)

This part of the report is mainly focused on IV film dressings used to secure Central Venous Access Devices (CVAD) in adults. CVAD is a device that is inserted via a vein where the catheter tip is located in a central vein, usually the superior vena cava or cavo-atrial junction (RCN, 2016). It is the recommended VAD for long-term IV therapy and other IV therapy that may not be possible to administer via a peripheral IV cannula, Central Venous Pressure (CVP) readings, emergency use e.g. rapid fluid replacement, in the absence of peripheral VAD and repeated blood sampling. CVAD may be further classified as temporary, semi-permanent or permanent in which entails securement as essential to provide avenue for various IV therapy. IV film dressings for CVAD may be used for the following types; peripheral inserted central catheter (PICC), non-cuffed-CVC, acute CVC, long-term tunnelled catheter, skin tunnelled catheters and implanted ports (NICE, 2016).

2.2 Intended Clinical Use

The intended clinical use of this group of IV film dressing is to secure or ensure additional stabilisation of a CVAD whilst providing an impermeable and waterproof barrier to bacteria which allows the transmission of vapour from the insertion site, thereby preventing the skin becoming inflamed and excoriated. In addition, the transparent component (flat film) of the dressing allows practitioners to be able to undertake daily visual inspection of the insertion site without having to remove or replace it (O'Grady et al, 2011; Department of Health (DH), 2010; RCN, 2011).

2.3 Clinical Practice

The use of intravenous devices has increased tremendously over the past decade, particularly CVAD. It has been instrumental to timely and efficient delivery of wide range IV therapies not just in the acute clinical setting but more so in the community setting for example, lifelong administration of parenteral nutrition (Broadhurst, et al 2017). The clinical benefits of CVAD is widely documented however, they are also associated with significant complications that could result to potentially lethal outcomes. It is vital therefore for clinicians who manage these devices to be aware of these complications and necessary strategies to reduce those (Moreau et al, 2013).

The key objectives in practice in CVAD care are maintaining patency and avoidance of Catheter-related blood stream infections, which is a particular problem with patients who have CVAD (Loveday et al 2014; O'Grady et al 2011). An international survey was conducted proving a wealth of international evidence-based guidelines to direct care and maintenance of CVADs. For the purpose of this part of the report it is notable that the majority of guidelines recommend the **use of clear transparent CVAD dressings** for wound coverage, skin antisepsis and CVAD securement devices. This non-occlusive dressing serves as a sterile barrier that helps to ward off bacterial ingess. These particular IV dressings are expected to completely cover and add device-stabilization at the insertion site and help keep the skin dry.

2.4 Clinical Impact

The CVAD- IV film dressing not only acts as a stabilization device but also to cover the breach in the skin at insertion and provide physical barrier to bacteria whilst allowing the transmission of vapour from the insertion site. Secure fixation of the CVAD prevents accidental or untimely dislodgement of the device as well as preventing unnecessary movement within the vein causing irritation to the internal lumen of the vein, which may ultimately result in mechanical phlebitis (most common VAD complication). If the dressing protecting the CVAD entry site is not intact could be potentially problematic (Alexander et al, 2009). These could result in delays in treatment and additional pain and distress to the patient.

The dressing selection should take into account the type of CVAD being secured; expected dwell time and consideration of the patients skin type and condition (RCN Standards for Infusion Therapy 2016). Preparation of the skin, i.e. leaving it to dry, is paramount when applying the dressing either at insertion or at change of dressing as may potentiate risk of infection and/or skin irritation (Hitchcock and Savine, 2015).

According to Loveday et al (2014), the evidence in the literature suggests that gauze and tape is as effective as a film dressing in securing the cannula, but does not offer the barrier to bacteria. If the gauze becomes wet it potentially provides a pathway for bacteria to colonise the entry site. The dressing needs to be transparent so that the insertion site can be visually inspected as a minimum during each shift and the visual

infusion phlebitis (VIP) scores (Jackson 1998) should be recorded. (RCN Standards for Infusion Therapy, 2016).

2.4 Product Technical Design

IV film dressings are deemed to be vapour permeable film dressings, which are transparent and of a suitable size to hold the device securely in place. The film adhesive may be silicone or acrylic-based. The dressing must be latex-free and supplied as sterile, individually wrapped and in packaging clearly marked for single-use only.

They are available from the national supplier in boxes of 50 or 100 individual dressings depending on the individual brand.

3. Pathway Methods

3.1 Intelligence Gathering

In preparation of the criteria, account has been taken of academic and related clinical evidence, known guidance and nationally recognised publications as further described in this Section 3.

3.1.1. Literature search

A literature search has been undertaken to establish what current academic knowledge exists on the products for evaluation. It should be noted that the team have not conducted a comprehensive or systematic review of literature. However, the team have interrogated the information to look for common themes which supported the development of the clinical criteria.

The search terms used (see below) generated many returns, including the recently published document 'Infusion Therapy Standards, Rapid Evidence Review 2016'. This Rapid review of the evidence was undertaken to support the development of the updated 'RCN Standards for Infusion Therapy, V4' published in December 2016 and provides a comprehensive review of the current literature base.

Search criteria	Databases searched	
 Film dressings Vapour permeable film dressings Vapour films Central Venous Access Device securement 	 NICE website evidence search https://www.evidence.nhs.uk/ NICE website journals and databases https://www.nice.org.uk/about/what-we-do/evidence-services/journals-and-databases (using Healthcare databases advanced search tool – Ovid, Medline, CINAHL, databases searched) 	
Date Range	Since 2000	
Language	English	

Figure 1 Literature and other sources searches – Vapour permeable film dressings used to secure vascular access devices.

3.1.2. National procurement provider specification

As the national procurement provider, NHS Supply Chain manages a framework of suppliers who are then listed in the national catalogue. These products are included in the General Wound care framework which covers a wider selection of products than just IV film dressings.

The specification used by the national provider (NHS Supply Chain) has been reviewed to understand what has previously been asked of suppliers of these dressings.

Film Dressings and Associated Products

- 3.5. All film dressings within this Lot must conform to the following requirements;
 - Be waterproof;
 - Be supplied sterile, individually wrapped and in packaging clearly marked for single use only;
 - Enable an aseptic, no-touch application technique (ANTT);
 - Have a minimum wear time of 48 hours and be atraumatic to the peri wound skin on removal:
 - Be available with silicone based or acrylic based adhesive; and
 - Be latex free.

Figure 2. NHS Supply Chain Framework Agreement Specification General Wound Care Rev: 3.0

3.1.3. National and international safety and quality standards

Account has also been taken of appropriate international and other standards as they pertain to the devices (e.g. from the International Organisation for Standardisation (ISO), European Standards (EN) and/or British Standards Institution (BSI). A review of Medicines & Healthcare products Regulatory Agency (MHRA) alerts has also been performed. The MHRA website (https://www.gov.uk/drug-device-alerts) returned no product alerts relating to this product category against the search terms previously described.

Medical Device Directive 93/42/EEC as amended, currently in transition to the new Medical Device Regulation MDR 2017/745

All products classified as a Medical Device must have their CE marking clearly evident on the product and/or packaging and meet the requirements set out within the standard(s) related to labelling.

3.1.4. Product suppliers and manufacturers

All suppliers listed within the national framework were invited to submit relevant evidence, product information and testing data to help support the review.

All suppliers provided some level of information from product brochure through to technical datasheets and compliance with standards.

3.1.6. Quality of evidence

Hierarchy of evidence

Levels of evidence sometimes referred to as hierarchy of evidence are assigned to studies based on the methodological quality of their design, validity, and applicability to patient care.

Hierarchy ranking	Description		
Level 1	A systematic review of all relevant randomised controlled trials (RCT) or evidence-based clinical practice guidelines based on systematic reviews of RCT evidence		
Level 2	Evidence from at least one well designed RCT		
Level 3	Evidence from well-designed controlled trials; non-randomised, quasi experimental		
Level 4	Well-designed case control & cohort studies		
Level 5	Systematic reviews of descriptive and qualitative studies		
Level 6	Evidence from a single, descriptive or qualitative study		
Level 7	Evidence from the opinion of authorities and/or reports of expert committees		

Figure 3– Hierarchy ranking: Evidence based practice in nursing & healthcare: a guide to best practice" (B.M. Melnyk & E. Fineout-Overholt; 2005; p10)

3.2 Best Practice Guidelines

The Royal College of Nursing 'Standards for Infusion therapy, V4 (2016)' are recognised as best practice guidelines and it is recommended within this document that local trust guidelines should be based on these guidelines.

4. NHS Clinical Engagement

In order to develop a shared vision of what is required from IV film dressings several methods of engagement were used. These events were used to formulate thoughts, ideas and needs from different clinicians familiar with these products; identifying their own expectation(s) of the product for their given patient group, and intended patient outcome, being used in a variety of differing clinical environments.

Mapping exercises were undertaken to determine personnel that should be involved and/or consulted regarding these products. This stage of the report focused on clinical staff who are:

- a) recognised as subject experts, and/or
- b) recognised regular users of the devices in their clinical practice.

Various methods of engagement were undertaken to ensure these clinical opinions were robust, and validated by peers from around the country, options of engagement included:

- Regional and national face-to-face events with NHS clinical colleagues
- Focused visits to NHS clinicians regional and national face-to-face events
- Website subscription
- Attendance at specialist network events
- Attendance at NHS Business Services Authority events
- Web-based surveys and e-engagement tools (e.g. email, WebEx, portal based surveys)

4.1 Clinical Conversations

To build a broad caucus of attendees at our events letters were sent inviting Trusts to nominate clinical colleagues to attend a series of regional group events. These were hosted by NHS organisations throughout England to enable the widest possible access for all invited. This ensured to set aside any pre-existing regional variance.

Details of the discussion outcomes were recorded in workbook form from the open events, transcribed and then used together with the evidence gathered at the previous project stage to inform a list of clinical criteria against which the product has been tested.

4.2 Clinical Criteria

The data received from all the NHS clinical conversation events, alongside the data collected from experts in the field of vascular access and IV therapy, was collated into a series of clinical criteria in alignment with part 1 of this series of clinical review.

A clinical criterion is defined for the purposes of this report as a principle or standard by which products may be evaluated. It is a statement which describes the clinician's requirements for the product.

The proposed criteria were validated by workshop attendees and all other clinical experts engaged in the development process.

Clinical Criteria Intravenous Vapour Permeable Films to secure Central Venous Access Devices (CVAD) in Adults

Packaging and Storage

The Lot Number, Expiry Date and Manufacturer details are present on outer packaging

The packaging has an easily identifiable description of correct use and size of dressing

The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging

The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging

Opening and Preparation

The individual dressing packet has clear instructions illustrating the application of the dressing

Ease of opening and preparing dressing on an aseptic field

Clinical Use

It is easy to identify the order in which the "backing" papers are removed and easy to remove

The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself

Ease of removing securing strips from backing paper (where present) whilst wearing gloves

The dressing must be easy to correctly position in relation to the CVAD insertion site

The dressing will not obscure the CVAD insertion site (visibility of the insertion site)

The dressing has an identifiable integral strip/label to record insertion date and time

The strip can be easily written on with a ballpoint black pen

Whilst removing the dressing the securement strips/device (where present) should prevent unnecessary movement of line ("pistoning" or micro movement) and continue to hold the CVAD securely in situ

On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin

Moisture Vapour Transmission rate (g/m2/24hrs)

Conformability = mean inflation pressure (mmhg)

Disposal

The outer packaging can be recycled

Figure 4 - clinical criteria

4.2.1. Criteria explanation- Inclusion Intravenous vapour permeable films used to secure CVAD in adults

To enhance the readers understanding of this report, and to provide value to the results, an explanation for the defined clinical criteria is captured.

Packaging Criteria	Explanation	
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging.	Clinicians have highlighted this to optimise time management and reduce error of selecting wrong product-which can also lead to longer treatment time, greater risk of compromising sterile field, increase patient risk and reduce patient concordance in treatment plan. This also promotes waste management.	
The packaging has an easily identifiable description of correct use and size of dressing.	Clinicians have told us Information regarding product is important to familiarise themselves with products before opening and prior to application preventing waste.	
There are clear instructions for use and product information within the packaging	Various clinical environment have different store, i.e. products are removed from external box packaging and decanted thus the individual packaging will be the only form of product identification. Clinicians identified this as paramount to avoid unnecessary waste with selecting and opening wrong product and to ensure the right technique of application is followed.	
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	To confirm that the packaging has information needed by users and meets standards required by EU directive and ISO.	
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing without the need to open the packaging	Clinicians need this to ensure appropriate product is readily available facilitating treatment, to prevent waste if wrong size is opened and risks for patients safety.	
Opening and Preparation Criteria	Explanation	
The individual dressing packet contains clear instructions for application of the dressing	Information regarding product is important for clinicians to familiarise themselves with products prior to application, and during procedure to optimise product efficacy and time taken to apply, together with enhancing professional delivery of care to patient.	

Ease of opening and preparing dressing on an aseptic field.

Clinicians have highlighted that inner packaging need to be EASY to open to facilitate ANTT™/Sterility. This will also avoid waste and enhance efficiency in performing the cannulation procedure. Also, to facilitate good practice, reducing the risk of infection and is in line with epic 3 guidelines and The Royal College of Nursing- Standards for Infusion Therapy.

Clinical Use Criteria

Explanation

It is easy to identify the order in which the "backing" papers are removed and easy to remove.

The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself

Ease of removing securing strips from backing paper (where present) whilst wearing gloves

The dressing must be easy to correctly position in relation to the CVAD insertion site

The dressing will not obscure the CVAD insertion site (visibility of the insertion site).

The dressing has an identifiable integral strip/label to record insertion date and time

The strip can easily be written on with a black pen.

Whilst removing the dressing the securement strips/device (where

Ease of application may reduce product wastage from wrong application, it may also reduce duration of procedure, which then leads to maintaining low risk device dislodgement, minimise risk of infection thereby enhancing patient safety. Furthermore this promotes skin integrity and patient comfort.

Clinicians have highlighted that dressing should cover the entire area, securing CVAD without compromising its integrity or increasing patient pain with film application improving patient experience and promote concordance.

For clinicians, visual infusion phlebitis (VIP) score is paramount which requires clear visibility of CVAD entry site to facilitate monitoring of the entry site without the need to remove/change the securing film dressing which may increase risk of infection, pain and result in poor patient experience and waste. This also allows the ability to assess skin integrity – and look out for signs of exudate, skin breakdown.

The option of recording strip enables clinician and patient at a glance to see CVAD and fixation device was applied providing governance "at a glance" without the need to access patient records. This is then serves as prompt for clinicians to act as appropriate i.e. due for change of dressing.

There is a compelling evidence to show micro movement of CVAD at manipulation i.e. change of dressing and handling of device at administration of IV Therapy causes

present) should prevent unnecessary movement of line ("pistoning" or micro movement) and continue to hold the CVAD securely in situ	mechanical phlebitis and increase risk of infection. Clinicians highlighted it is paramount that this is kept to a minimum if cannot be avoided at all.
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin.	Pain and trauma of dressing removal is a significant factor in patient experience, and concordance with care
Moisture Vapour Transmission rate (g/m2/24hrs)	Films are often referred to as vapour permeable film dressings; MVTR refers to the properties of the film and clinicians requested clear visibility of what the actual MVTR rates are for the differing films.
Conformability = mean inflation pressure (mmhg)	The requirement of the dressing to conform to the bodies contours ensures the dressing promotes optimum benefit of the dressing by securing the CVAD as it adheres to the skin and therefore reduces the risk of infections.

Figure 5- Clinical criteria inclusion explanation

4.2.2. Criteria explanation- Exclusion Intravenous vapour permeable films used to secure CVAD in adults

To capture true representation of clinical opinion, this report also aims to capture criteria that were raised, but not included as final criteria when the evaluation of the IV film dressings took place.

Criteria relating to the products being licensed for neonatal or paediatric use were not included as following the clinical conversations it was decided to narrow the scope of the report to adult dressings only. A separate product evaluation utilising the expertise of paediatric and neonatal clinicians will be undertaken of IV film dressings listed as being suitable for use in *neonates and paediatric patients*.

The following dressings have been excluded from the scope of this report:

- Film dressings used to secure paediatric and peripheral (or short term)
 vascular access devices. Part 1 of this report is IV films dressings to secure peripheral intravenous access devices.
- Dressings smaller than 5cm x 5.75cm as these are mainly used to secure devices in children or those specifically marketed as a paediatric dressing.
- Medicated dressings such as those dressings with impregnated with chlorhexidine gluconate (CHG

- Film dressings with additional integrated securement device marketed as not a dressing but as a securement device only.
- IV film dressings used for wound care.

4.3 Product Evaluation

Evaluation methodologies are defined for each and every clinical criterion. They reflect a simulated clinical environment.

Wherever possible, products were supplied in a 'ward ready' unit of issue as would be found by clinical staff on accessing a store area in their clinical environment. Where this has not been possible it was acknowledged as part of the product assessment results matrix.

The tests were formulated to move through the key aspects of product use using the NHS Clinical Evaluation Team product cycle:

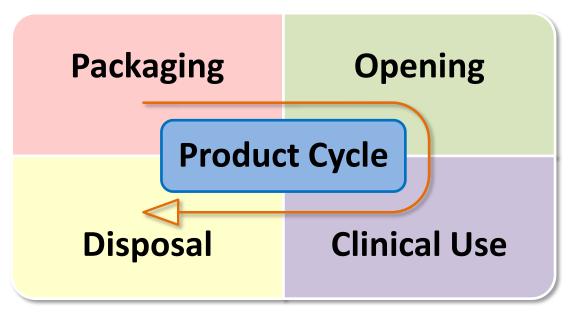


Figure 6 - NHS Clinical Evaluation Team Product Cycle

The evaluation product was ordered and picked from the NHS distribution centres. Products evaluated have been stored post evaluation for a period of three months after publication of this review.

Practicing NHS clinical staff were invited to review the products in accordance with the developed criteria. It was not possible to 'blind' the evaluations; in the sense that the evaluators were aware of the product brand; however, the product to be evaluated was independently picked in accordance with the product selection criteria in Section 2 and prepared for evaluation by colleagues who were not otherwise involved in the process.

Each clinical evaluator entered data independently and without inter-rater comparison into their own workbook. These were then collated, reviewed and summarised by the clinical specialist lead for the project.

As part of the evaluation preparation, each evaluator was given a more detailed and product specific definition for each of the scores

The defined criteria either prompted a 'yes/no' answer, represented with a \sqrt{X} , or a score was given between 0 and 2, or 0 and 3 as follows:

Score	Meaning
0	This does not meet the criteria
1	This partially meets the criteria
2	This meets the criteria
3	This exceeds the criteria

Figure 7 – NHS Clinical Evaluation Team scoring methods

These numerical scores across all evaluators were totalled and a mean value determined. This mean value has then been converted into a star rating (see matrix below).

The mean values convert to a star rating in accordance with the following table:

Point scored		St	Star value	
0	to	0.99	0	Stars
1.00	to	1.24	1	Star
1.25	to	1.74	1.	5 Stars
1.75	to	2.24	2	Stars
2.25	to	2.74	2.	5 Stars
2.75	to	3.00	3	Stars

Figure 8 – conversion of mean scores to star rating

The above scoring mechanisms will not be followed where the criterion identified by the CET cannot reasonably exceed expectations. For example, if the clinical criterion was whether the removal of an adhesive dressing was atraumatic and with the individual patient reporting no pain or skin damage, then it cannot reasonably be expected that a product could exceed that criteria. Therefore, in such circumstances, the relevant criteria will be based on the scoring regime of:

a. If the criterion is a Yes/No response, the responses will be converted into aggregate percentages and then star ratings as follows:

Percentages	Star value
0% to 24.99%	0 star
25% to 49.99%	1 star
50% to 74.99%	1.5 stars
75% to 100%	2 stars

Figure 9 – Percentage scores to star rating

b. For other subjective criteria, the responses will be converted into mean scores and then star ratings as follows:

Point scored	Star value
0 to 0.49	0 star
0.5 to 0.99	1 star
1 to 1.49	1.5 stars
1.5 to 2.00	2 stars

Figure 10 – Points scores to star rating

On the basis that clinical evaluators will be providing scores as follows:

- 0 stars Does not meet the criteria
- 1 star Partially meets the criteria
- 2 stars Meets the criteria

All supplemental products used in the evaluation are in use in the NHS and available through the national catalogue (e.g. clinical waste containers, gloves, cannulas).

Evaluators were also encouraged to record comments where they felt it necessary to provide rationale for their scoring and answers.

The results obtained have been validated by the NHS Clinical Evaluation Team moderation committee for consistency of scoring and interpretation. These results are presented in the product assessment reports herein.

5. Product Assessment Results

The following product assessment results pages show the tested clinical criteria listed vertically on the left-hand side of the page with the tested device found horizontally across the top of the matrix. The accompanying photographs were taken during evaluation. These photographs are of sample products provided for evaluation. Lot numbers were recorded and samples have been retained in storage following the completion of evaluation.

The products represented are the range of suppliers and brands available through the NHS national procurement provider's framework.

Results can be seen within the product matrix. Each clinical product has been given a star rating and the evaluator's collated comments are included in the matrix.

The product assessment results have been divided into 3 sub-categories of intravenous cannula: winged ported, winged non-ported (winged straight) and non-winged non-ported (straight). Intravenous cannulae that incorporate an extension set and needle free connector were excluded from this dressing evaluation.

NB: Wear time for each particular dressing was not evaluated as this is subject to a number of variables which cannot be replicated in a test environment. Wear time as per the manufacture's literature has been included in the matrix for guidance only. The clinician should decide which dressing is most suited to their client group and clinical indication. As with all dressings consideration needs to be taken into account of the patient's current clinical condition, their skin type and the duration of the expected dwell time of the cannula.

5.1.1. Independent Laboratory testing results

The Surgical Materials Testing Laboratory (SMTL) in Wales was commissioned by the CET to carry out independent testing on all suppliers' dressings on the current framework. Samples were drawn from NHS Supply Chain warehouse at Normanton, along with products only available via the blue diamond route, and were couriered to the SMTL facility in Wales. SMTL were asked to assess the Moisture Vapour Transmission Rate (MVTR), waterproofness and the conformability of the dressings. Clinicians asked for the information to be presented in a single graphical format for each of these two factors. Several suppliers provided MVTR information but it was decided to independently verify this information.

The dressings were tested by SMTL as per standard EN 13726-2 with a modification to the method of a smaller aperture cell (2cm) with a test volume of 10ml.

The full results from the tests are presented tubular and graphical format in Part 1 of this report. Specific for IV films dressings have been extracted and included into the respective matrices.

Waterproofness

All dressings complied with this test.

Conformability

Conformability of the dressings was tested using standard SMTL testing methodology and is expressed as the 'Mean Inflation Pressure' The laboratory testing measured the degree of pressure require to contour the dressings to the same proportion. As such the higher the pressure required, the less conformable (more rigid) the film was noted to be, measured in millimetres of Mercury (mmHg)

Moisture Vapour Transmission rate g/m²/24hrs (MVTR)

Clinicians have highlighted this was an important feature and thought they knew what it was, but often did not know how the dressing they were using rated against other dressings.

MVTR is the rate at which the dressing allows moisture to pass through the dressing from the insertion site to the exterior whilst avoiding the entry of bacteria or moisture from the external environment. It is recorded in grams per meter square per 24 hours (g/m2/24hrs), the higher the resulting number the greater vapour transmission function of the film dressing

This keeps the insertion site dry and reduces the risk of skin damage due to maceration and a risk of bacterial colonization..

Clinical staff should assess the relevance of this feature in relation to their individual patient's needs, for example a dressing with a higher MVTR may be more suitable in a patient with clammy skin, where moisture may accumulate under the dressing necessitating more frequent dressing changes.

NB: The MVTR test was carried out using a modification to the standard EN 13726-2 method in that a smaller aperture cell (2cm) was used for the dressings with a test volume of 10ml.

Testing was carried out on the film dressings available on the framework in May 2017.

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







3M HEALTHCARE



		The second secon	
NPC	ELW335	ELW400	ELW074
MPC	1685R	1686	1635
BRAND	Tegaderm	Tegaderm	Tegaderm
BASE DESCRIPTION	3M [™] Tegaderm [™] I.V. Advanced Securement Dressing 1685 8.5x11.5cm	3M™ Tegaderm™ Diamond Pattern I.V. Film Dressing Frame Style 1686 10x12cm	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	8.5cm x 11.5cm	10cm x 12cm	8.5 x 10.5cm (tolerance +/- 5%) (BASICLINE)
WEAR TIME AS STATED BY MANUFACTURER	Up to 7 Days	Up to 7 Days	Up to 7 Days
ADHESIVE PROPERTIES	Polyurethane with Acrylate Adhesive	Polyurethane with Acrylate Adhesive	Polyurethane with Acrylate Adhesive
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	3270 (SD 137)	3270 (SD 137)	696 (SD 28)
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	160.5	160.5	160.5
CLINICAL CRITERIA	SCORE	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.29)	(2.43)	(2.29)
There are clear instructions for use and product information within the packaging	(2.14)	★★★ (2.29)	★★★ (2.29)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	(2.29)	(2.29)	(2.00)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	★★ (1.71)*	★★ (1.57)*	★★ (1.57)*
The individual dressing packet has clear instructions illustrating the application of the dressing	(1.71)	(1.71)	(1.71)
The dressing must be easy to open on an aseptic field	(2.00)*	(2.00)*	★★ (1.86)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	* * * (1.71)	(1.00)	(1.00)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.57)	(2.14)	(2.14)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (2.14)	(0.00)	★★★ (2.29)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.14)	★★★ (2.29)	(2.29)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (2.00)*	(2.00)*	(2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓	✓
The strip can be written on with a black ballpoint pen	(2.43)	(2.43)	(2.14)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (2.00)*	★★ (1.86)*	★★ (1.86)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	(1.43)	★★★ (2.00)	★★★ (2.43)
The outer packaging can be recycled	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







	1	
NPC	ELW624	ELW174
MPC	1688	1689
BRAND	Tegaderm	Tegaderm
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	10cm x 12cm (tolerance +/- 10%) (BASICLINE)	10 x 15.5cm (tolerance +/- 10%) (BASICLINE)
WEAR TIME AS STATED BY MANUFACTURER	Up to 7 Days	Up to 7 Days
ADHESIVE PROPERTIES	Polyurethane with Acrylate Adhesive	Polyurethane with Acrylate Adhesive
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	3270 (SD 137)	3270 (SD 137)
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	160.5	160.5
CLINICAL CRITERIA	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.43)	★★★ (2.29)
There are clear instructions for use and product information within the packaging	(1.86)	★★★ (1.86)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	(2.29)	(2.14)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(1.43)*	★★ (1.57)*
The individual dressing packet has clear instructions illustrating the application of the dressing	★★★ (1.86)	★★★ (1.57)
The dressing must be easy to open on an aseptic field	★★ (2.00)*	★★ (2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(1.14)	(1.14)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	(2.14)	(2.00)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (2.29)	★★★ (1.86)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	★★★ (2.14)	★★★ (2.00)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (2.00)*	★★ (2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓
The strip can be written on with a black ballpoint pen	(2.43)	(2.43)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.86)*	★★ (1.86)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	(1.57)	★★ ★ (1.71)
The outer packaging can be recycled	✓	✓

365 HEALTHCARE LTD

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS





	ALEXA DESCRIPTION OF THE PERSON OF THE PERSO
NPC	ELW549
MPC	36590020
BRAND	365 IV FILM
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	10cm x 12cm (tolerance +/- 10%) (BASICLINE)
WEAR TIME AS STATED BY MANUFACTURER	not stated
ADHESIVE PROPERTIES	Semi-permeable polyurethane coated with hypoallergeic acrylic adhesive
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	36590046
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	194.3
CLINICAL CRITERIA	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓
The packaging has an easily identifiable description of correct use and size of dressing	(1.86)
There are clear instructions for use and product information within the packaging	(0.00)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	(1.43)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	★★ (2.00)*
The individual dressing packet has clear instructions illustrating the application of the dressing	(0.00)
The dressing must be easy to open on an aseptic field	★★ (2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(2.43)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.71)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (1.00)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.57)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	(2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓
The strip can be written on with a black ballpoint pen	(2.14)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	(1.43)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (1.86)
The outer packaging can be recycled	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







AQUILANT LTD



	-	Service III	70
NPC	ELW041	ELW106	ELW112
MPC	4925	59410882	66004009
BRAND	IV3000	IV3000	IV3000
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile	Dressing IV Vapour-Permeable Adhesive Film Sterile	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	10cm x 14cm Central Line Catheters	10cm x 12cm Central Line Catheters (Frame Delivery)	9cm x 12cm (tolerance +/- 3%) (BASICLINE)
WEAR TIME AS STATED BY MANUFACTURER	Not stated	Not stated	Not stated
ADHESIVE PROPERTIES	REACTIC ™	REACTIC ™	REACTIC ™
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	19000	19000	19000
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	130.5	130.5	130.5
CLINICAL CRITERIA	SCORE	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(1.71)	★★★ (3.00)	(3.00)
There are clear instructions for use and product information within the packaging	★★★ (3.00)	★★★ (3.00)	(3.00)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	*** (2.14)	★★★ (3.00)	★★★ (3.00)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(1.00)*	(1.00)*	(1.00)*
The individual dressing packet has clear instructions illustrating the application of the dressing	(1.43)	★★★ (2.86)	(2.29)
The dressing must be easy to open on an aseptic field	(2.00)*	(2.00)*	(2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(0.00)	★★★ (2.86)	★★★ (2.86)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	* * * (1.71)	★★★ (2.71)	★★★ (2.71)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	(0.00)	★★★ (2.71)	★★★ (2.00)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(1.43)	★★★ (2.00)	(2.43)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (2.00)*	(2.00)*	★★ (2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	X	✓	✓
The strip can be written on with a black ballpoint pen	(0.29)	★★★ (3.00)	(2.71)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	(1.43)*	★★ (1.86)*	★★ (2.00)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (1.29)	★★ (1.86)	★★★ (1.71)
The outer packaging can be recycled	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







AQUILANT LTD



BRAND DATE OF THE INTERIOR OF		76.00	II elle	
BASE DESCRIPTION ABSE DESCRIPTION Dressing IV Vapour-Permeable Adhesive Filin Sterile 10m x 12mm (Description Vapour-Permeable) Adhesive Filin Sterile Adhesive Filin Sterile Adhesive Filin Sterile 10m x 12mm (Description Vapour-Permeable) 10m x 12mm (Description Vapour-Permeable Vapour (Description Vapour Vapour Vapour (Description Vapour Vapou	NPC	ELW054	ELW363	ELW099
Dressing IV Vapour-Permeable Adhesive film Settle SECONDARY DESCRIPTION 10m x 22m (tolerance +7 10%) (INSTALLAN) WEAR TIME AS STATED BY MANUFACTURER Not stated Not state	MPC	4008	66800512	4649
Adhesive film Sterile SECONDARY DESCRIPTION 100m x 12m (tolerance + 10%) 11x 15.5m (tolerance + 10%) 11x 15.5m (tolerance + 10%) 12m x 12m (t	BRAND	IV3000	IV3000	IV3000
(BASICUNE) (BASI	BASE DESCRIPTION			Dressing IV Vapour-Permeable Adhesive Film Sterile
ADHESIVE PROPERTIES REACTIC TM REACTIC T	SECONDARY DESCRIPTION			10cm x 20cm (tolerance +/- 5%) (BASICLINE)
MOISTURE VAPOUR TRANSMISSION RATE (G/M*/24HRS) 190000 19000 190000 190000 190000 190000 190000 190000 190	WEAR TIME AS STATED BY MANUFACTURER	Not stated	Not stated	Not stated
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG) 130.5 144.2 140.00	ADHESIVE PROPERTIES	REACTIC ™	REACTIC ™	REACTIC ™
CLINICAL CRITERIA SCORE SCORE SCORE SCORE SCORE SCORE The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging The packaging has an easily identifiable description of correct use and size of dressing *** (2.43)	MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	19000	19000	19000
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging The packaging has an easily identifiable description of correct use and size of dressing *** (2.43) *** (2.71) *** (2.00) The rear clear instructions for use and product information within the packaging *** (3.00) *** (3.00) *** (2.43) *** (2.43) The individual dressing wrapper/packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing must be easy to open on an aseptic field *** (2.29) *** (2.29) *** (2.00)* *** (2.	CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	130.5	130.5	130.5
The packaging has an easily identifiable description of correct use and size of dressing The packaging has an easily identifiable description of correct use and size of dressing The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging The individual dressing packet has clear instructions illustrating the application of the dressing will define the dressing must be easy to open on an aseptic field The dressing must be easy to open on an aseptic field The clinician must be able to remove the backing papers whilst wearing gloves without the dressing sticking to itself Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site The dressing mist be easy to correctly position in relation to the CVAD insertion area site The dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atximuatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	CLINICAL CRITERIA	SCORE	SCORE	SCORE
There are clear instructions for use and product information within the packaging The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging The individual dressing packet has clear instructions illustrating the application of the dressing The dressing must be easy to open on an aseptic field The dressing must be easy to open on an aseptic field The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site The dressing will not obscure the CVAD insertion site (Visibility of insertion site) The dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging The individual dressing packet has clear instructions illustrating the application of the dressing The dressing must be easy to open on an aseptic field *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.43) *** (2.29) *** (2.29) *** (2.20)* *** (2.00)* It is easy to identify the order in which the 'backing' papers are removed and easy to remove It is easy to identify the order in which the 'backing papers whilst wearing gloves without the dressing 'sticking' to itself Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site *** (2.43) *** (2.43) *** (2.29) *** (2.00)* *** (2.00)* *** (2.71) **	The packaging has an easily identifiable description of correct use and size of dressing	(2.43)	(2.71)	*** (2.00)
individual dressing wrapper/packaging The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging The individual dressing packet has clear instructions illustrating the application of the dressing The dressing must be easy to open on an aseptic field ***(2.29) ***(2.29) ***(2.29) ***(2.00)* ***(2.00	There are clear instructions for use and product information within the packaging	★★★ (3.00)	★★★ (3.00)	*** (2.86)
dressing (e.g. shape) without the need to open the packaging The individual dressing packet has clear instructions illustrating the application of the dressing The dressing must be easy to open on an aseptic field ***(2.29) ***(2.29) ***(2.29) ***(2.00)* ***(2.00)* It is easy to identify the order in which the 'backing' papers are removed and easy to remove The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site ***(2.43) The dressing will not obscure the CVAD insertion site (Visibility of insertion site) ***(2.57) ***(2.57) ***(2.57) ***(2.57) ***(2.57) ***(2.00)*	The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	★★★ (2.43)	*** (2.43)	★★★ (2.43)
The dressing must be easy to open on an aseptic field ***(2.00)** ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.00)* ***(2.71) ***(2	The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(1.00)*	(1.00)*	(1.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site The dressing will not obscure the CVAD insertion site (Visibility of insertion site) Does the dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (2.71) *** (2.71) *** (2.71) *** (2.43) *** (2.43) *** (2.57) *** (2.43) *** (2.57) *** (2.57) *** (2.60)* *** (2.00)* *** (2.00)* *** (2.86) *** (2.86) *** (2.86) *** (2.86) *** (2.86) *** (2.86) *** (2.00)* *** (2.00)*	The individual dressing packet has clear instructions illustrating the application of the dressing	(2.29)	(2.29)	(1.86)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site The dressing will not obscure the CVAD insertion site (Visibility of insertion site) The dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (1.57) (2.71) (2.71) (2.43) (2.43) (2.57) (2.57) (3.44) (2.57) (4.257) (4.26) (2.00)* (2.00)* (3.65) (3.66) (4.171)* (4.171)* (5.77)* (6.29)	The dressing must be easy to open on an aseptic field	★★ (2.00)*	(2.00)*	(2.00)*
dressing 'sticking' to itself (2.71) (1.57) Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site (2.43) (2.57) (0.29) The dressing will not obscure the CVAD insertion site (Visibility of insertion site) The dressing will not obscure the CVAD insertion site (Visibility of insertion site) Does the dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (2.71) (2.71) (2.71) (2.43) (2.43) (2.57) (2.57) (2.57) (2.00)* (2.00)* (2.00)* (2.00)* (2.00)* (2.00)* (2.00)* (3.66) (3.71)* (4.57)* (4.57)* (5.77)* (6.29)	It is easy to identify the order in which the 'backing' papers are removed and easy to remove	★★★ (2.71)	★★★ (2.86)	(1.14)
gloves The dressing must be easy to correctly position in relation to the CVAD insertion area site The dressing will not obscure the CVAD insertion site (Visibility of insertion site) Does the dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (2.43) (2.57) (2.57) (2.57) (2.57) (2.57) (2.00)* (2.00)* (2.00)* (2.00)* (2.00)* (3.29) (3.29) (4.1.71)* (4.1.71)* (4.1.71)* (4.1.86)	The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.71)	★★★ (2.71)	★★★ (1.57)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site) ***\times (2.00)** ***\times (2.86) ***\times (2.86) ***\times (2.86) ***\times (2.86) ***\times (2.86) **\times (2.00)* ***\times (1.57)* ***\times (1.57)* ***\times (1.43)	Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (2.43)	★★★ (2.57)	(0.29)
Does the dressing have an identifiable integral strip/label to record insertion date and time The strip can be written on with a black ballpoint pen Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (2.86)	The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.57)	(2.57)	★★★ (1.86)
The strip can be written on with a black ballpoint pen **** (2.86) Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (2.86) **** (2.86) (1.71)* (1.71)* (1.86)	The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (2.00)*	★★ (2.00)*	★★ (2.00)*
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (1.57)*	Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓	Х
unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin (1.43)	The strip can be written on with a black ballpoint pen	★★★ (2.86)	★★★ (2.86)	(0.29)
pain free and their skin under the dressing is of a similar condition to the surrounding skin (1.43)	Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (2.00)*	★★ (1.71)*	★★ (1.57)*
The outer packaging can be recycled ✓ ✓ ✓	On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	(1.43)	★★★ (1.86)	★★★ (2.00)
	The outer packaging can be recycled	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS





BSN

NPC	ELW722
MPC	7239003
BRAND	Leukomed IV
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	8.5cm x 11cm
WEAR TIME AS STATED BY MANUFACTURER	Not stated.
ADHESIVE PROPERTIES	Polyacrylate pressure sensitive adhesive
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	828
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	125.6
CLINICAL CRITERIA	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓
The packaging has an easily identifiable description of correct use and size of dressing	★★★ (2.86)
There are clear instructions for use and product information within the packaging	(1.00)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	★★★ (2.14)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	★★ (2.00)*
The individual dressing packet has clear instructions illustrating the application of the dressing	★★★ (2.86)
The dressing must be easy to open on an aseptic field	★★ (2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(0.57)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.14)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (2.14)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.00)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	(2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓
The strip can be written on with a black ballpoint pen	(1.57)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.71)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (1.86)
The outer packaging can be recycled	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







CLINISUPPLIES LTD



	2.00	Registration 27.5	20 MB u
NPC	0	0	0
MPC	D-FMIV9X12AF/B	D-FMIV10X12AF/B	D-FMIV10X15.5AF/B
BRAND	CLINIclear- iv	CLINIclear- iv	CLINIclear- iv
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile	Dressing IV Vapour-Permeable Adhesive Film Sterile	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	9cm x 12cm (tolerance +/- 3%) (BASICLINE)	10cm x 12cm (tolerance +/- 10%) (BASICLINE)	12 x 15.5cm (tolerance +/- 10%) (BASICLINE)
WEAR TIME AS STATED BY MANUFACTURER	No Information Available	No Information Available	No Information Available
ADHESIVE PROPERTIES	CCK, PU, PSA(adhesive), Glassine paper	CCK, PU, PSA(adhesive), Glassine paper	CCK, PU, PSA(adhesive), Glassine paper
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	Not available at time of report publication	Not available at time of report publication	Not available at time of report publication
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	Not available at time of report publication	Not available at time of report publication	Not available at time of report publication
CLINICAL CRITERIA	SCORE	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.14)	(1.43)	(2.14)
There are clear instructions for use and product information within the packaging	(2.00)	(0.00)	(0.00)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	★★★ (2.14)	★★★ (2.00)	★★★ (2.14)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(0.29)*	(0.29)*	(0.29)*
The individual dressing packet has clear instructions illustrating the application of the dressing	★★★ (0.00)	(0.00)	(0.00)
The dressing must be easy to open on an aseptic field	★★ (1.71)*	★★ (1.71)*	★★ (1.71)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(0.29)	(0.43)	(0.29)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.00)	★★★ (2.29)	★★★ (2.14)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	(0.29)	(0.00)	(0.00)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	★★★ (1.86)	(1.57)	(1.86)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	(2.00)*	★★ (2.00)*	(2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓	✓
The strip can be written on with a black ballpoint pen	(2.29)	★★★ (2.57)	(2.00)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.57)*	(1.43)*	★★ (1.14)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	(2.00)	(1.86)	(1.86)
The outer packaging can be recycled	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







ISKUS HEALTH UK LTD





				Section 100 Sectio
NPC	ELW910	ELW911	ELW908	ELW909
MPC	SV40XT-6	SV41UDXT-6	SV353UDT-6	SV37UDT-6
BRAND	SorbaView 2000	SorbaView Ultimate	SorbaView Shield	SorbaView Shield
BASE DESCRIPTION	Dressing IV vapour-permeable adhesive film sterile	Dressing IV vapour-permeable adhesive film sterile	Dressing IV Fixation Device Vapour Permeable Adhesive Film Sterile	Dressing IV Fixation Device Vapour Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	PICC Line Dressing w/Notch 9.52cm x 12.7cm	PiCC/CVC IV Window Dressing (PICC Port Subclavian Driveline Tunneled Jugular Femoral) 13cm x 9.5cm Latex Free	Medium IV Securement Dressing (PICC Midline Subclavian Jugular Tunnelled Dialysis) 14cm x 9.5cm	Large IV Securement Dressing (CVC Tunnelled Jugular Dialysis Femoral) 16cm x 9.5cm
WEAR TIME AS STATED BY MANUFACTURER	Up to 7 days	Up to 7 days	Up to 7 days	Up to 7 days
ADHESIVE PROPERTIES	Polyacrylate adhesive (Medical-grade + aggressive tack)	Acrylic based adhesive	Acrylic Based Adhesive	Acrylic Based Adhesive
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	556	1209	Not Available at the time of report publication	Not Available at the time of report publication
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	Not Available at the time of report publication	Not Available at the time of report publication	Not Available at the time of report publication	Not Available at the time of report publication
CLINICAL CRITERIA	SCORE	SCORE	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.00)	(2.00)	(2.14)	(2.14)
There are clear instructions for use and product information within the packaging	(2.57)	(2.00)	(2.29)	(2.29)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	(2.00)	(2.00)	(2.00)	(2.00)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(0.14)*	(0.14)*	(0.14)*	(0.14)*
The individual dressing packet has clear instructions illustrating the application of the dressing	(1.43)	(1.43)	(0.57)	(0.57)
The dressing must be easy to open on an aseptic field	(2.00)*	★★ (2.00)*	★★ (2.00)*	★★ (2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(1.43)	(1.43)	(0.71)	(0.71)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.29)	★★★ (2.29)	** (2.43)	*** (2.14)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (2.00)	(2.57)	★★★ (2.29)	★★★ (2.29)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.00)	★★★ (2.00)	(2.00)	(2.00)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (2.00)*	★★ (1.86)*	(2.00)*	★★ (1.86)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓	✓	✓
The strip can be written on with a black ballpoint pen	★★★ (2.86)	★★★ (2.86)	★★★ (2.14)	★★★ (2.00)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.86)*	★★ (1.71)*	★★ (1.86)*	★★ (2.00)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (2.00)	★★★ (2.00)	★★★ (1.71)	★★★ (2.00)
The outer packaging can be recycled	✓	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







ISKUS HEALTH UK LTD





		The second secon		
NPC	ELW912	ELW913	ELW914	ELW915
MPC	SV430AFXT-6	SV430UDT-6	SV733UDT-6	SV733AFXT-6
BRAND	SorbaView Shield	SorbaView Shield	SorbaView Shield	SorbaView Shield
BASE DESCRIPTION	Dressing IV Fixation Device Vapour Permeable Adhesive Film Sterile	Dressing IV Fixation Device Vapour Permeable Adhesive Film Sterile	Dressing IV Fixation Device Vapour Permeable Adhesive Film Sterile	Dressing IV Fixation Device Vapour Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	Contour IV Securement Dressing (PICC / CVC Jugular Subclavian Femoral Tunnelled Perfect for Multi-Lumen Catheters) 9.5cm x 12cm with Adhesive Free Zone	Contour IV Securement Dressing (PICC / CVC Jugular Subclavian Femoral Tunnelled Perfect for Multi-Lumen Catheters) 9.5cm x 12cm	Oval IV Securement Dressing (CVC Subclavian Jugular Tunnelled Femoral Dialysis) 12cm x 15cm	Oval IV Securement Dressing (CVC Subclavian Jugular Tunneller Femoral Dialysis) 12cm x 15cm with Adhesive Free Zone
WEAR TIME AS STATED BY MANUFACTURER	Up to 7 days	Up to 7 days	Up to 7 days	Up to 7 days
ADHESIVE PROPERTIES	Not available at the time of report publication	Acrylic based adhesive	Acrylic based adhesive	Not available at the time of repor publication
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	Not available at the time of report publication	Not available at the time of report publication	Not available at the time of report publication	Not available at the time of repor publication
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	Not Available at the time of report publication	Not Available at the time of report publication	Not Available at the time of report publication	Not Available at the time of report publication
CLINICAL CRITERIA	SCORE	SCORE	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.00)	(2.00)	(2.00)	(2.14)
There are clear instructions for use and product information within the packaging	(2.00)	(2.00)	★★★ (2.14)	(2.14)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	(2.00)	(2.00)	(2.00)	(2.00)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(0.14)*	(0.14)*	(0.43)*	(0.14)*
The individual dressing packet has clear instructions illustrating the application of the dressing	(0.57)	(0.86)	(0.86)	(0.57)
The dressing must be easy to open on an aseptic field	★★ (1.86)*	★★ (2.00)*	★★ (1.86)*	★★ (1.86)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(0.71)	(1.29)	(0.71)	(0.57)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.14)	★★★ (2.14)	★★★ (2.00)	★★★ (2.14)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	★★★ (2.00)	★★★ (2.14)	(2.57)	★★★ (2.29)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	★★★ (2.14)	★★★ (2.14)	★★★ (1.86)	★★★ (2.14)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	(2.00)*	(2.00)*	(1.86)*	★★ (1.86)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓	✓	✓
The strip can be written on with a black ballpoint pen	(2.00)	(2.00)	(2.57)	(2.00)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.71)*	★★ (2.00)*	★★ (2.00)*	★★ (1.86)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (2.00)	★★★ (2.33)	★★★ (2.17)	*** (2.17)
The outer packaging can be recycled	✓	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS







RICHARDSON HEALTHCARE LTD





NPC	ELW652	ELW833	ELW653	ELW932
MPC	816080	816085	816100	816070
BRAND	ClearFilm IV	ClearFilm IV	ClearFilm IV	Clearfilm IV
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile			
SECONDARY DESCRIPTION	10cm x 12cm (tolerance +/- 10%) (BASICLINE)	10cm x 12cm	10cm x 15cm	8.5cm x 11.5cm
WEAR TIME AS STATED BY MANUFACTURER	Not Stated	Not stated	Not stated	Not stated
ADHESIVE PROPERTIES	Thin film coated with layer of hypoallergenic adhesive			
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	847	847	847	847
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	196.5	196.5	196.5	196.5
CLINICAL CRITERIA	SCORE	SCORE	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.14)	★★★ (2.14)	★★★ (2.29)	(2.14)
There are clear instructions for use and product information within the packaging	(2.57)	★★★ (2.86)	★★★ (2.86)	(2.43)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	★★★ (2.29)	★★★ (2.14)	★★★ (2.29)	★★★ (2.00)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	★★ (1.71)*	★★ (1.71)*	★★ (1.71)*	★★ (2.00)*
The individual dressing packet has clear instructions illustrating the application of the dressing	(0.86)	★★★ (1.71)	(0.57)	(1.29)
The dressing must be easy to open on an aseptic field	★★ (1.71)*	★★ (1.71)*	★★ (2.00)*	★★ (2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(1.71)	(1.29)	(1.29)	(1.71)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (3.00)	★★★ (2.86)	★★★ (2.86)	★★★ (2.57)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	*** (0.00)	** (2.43)	★★★ (3.00)	(2.29)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.43)	★★★ (2.29)	(2.57)	** (2.71)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (2.00)*	★★ (2.00)*	★★ (2.00)*	★★ (1.86)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓	✓	✓
The strip can be written on with a black ballpoint pen	(2.43)	★★★ (2.71)	(2.43)	(2.14)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.71)*	★★ (1.86)*	★★ (2.00)*	★★ (2.00)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (1.86)	★★★ (2.00)	★★★ (1.71)	★★★ (2.00)
The outer packaging can be recycled	✓	✓	✓	✓

IV FILM DRESSINGS (PART 2) SECURING CVAD IN ADULTS





SHERMOND

		Annual Control of the
NPC	ELW734	ELW735
MPC	5450	5451
BRAND	Premierfilm	Premierfilm
BASE DESCRIPTION	Dressing IV Vapour-Permeable Adhesive Film Sterile	Dressing IV Vapour-Permeable Adhesive Film Sterile
SECONDARY DESCRIPTION	9cm x 12cm (tolerance +/- 3%) (BASICLINE)	14 x 15.5cm (tolerance +/- 10%) (BASICLINE)
WEAR TIME AS STATED BY MANUFACTURER	Not Stated	Not stated
ADHESIVE PROPERTIES	Polyurethane coated with Polyacrilic Adhesive	Polyurethane coated with Polyacrilic Adhesive
MOISTURE VAPOUR TRANSMISSION RATE (G/M²/24HRS)	1019	1019
CONFORMABILITY = MEAN INFLATION PRESSURE (MMHG)	139.1	139.1
CLINICAL CRITERIA	SCORE	SCORE
The Lot Number, Expiry Date and Manufacturer Details are present on outer packaging	✓	✓
The packaging has an easily identifiable description of correct use and size of dressing	(2.00)	★★★ (2.43)
There are clear instructions for use and product information within the packaging	(2.14)	(2.43)
The intended use, reorder details, size, lot number and expiry date is simple to identify on the individual dressing wrapper/packaging	★★★ (2.00)	★★★ (2.29)
The individual dressing packet is clear on at least one side allowing easy visualisation of the dressing (e.g. shape) without the need to open the packaging	(1.14)*	★★ (1.71)*
$\label{thm:continuity} The \ individual \ dressing \ packet \ has \ clear \ instructions \ illustrating \ the \ application \ of \ the \ dressing$	★★★ (2.00)	(2.14)
The dressing must be easy to open on an aseptic field	★★ (2.00)*	★★ (2.00)*
It is easy to identify the order in which the 'backing' papers are removed and easy to remove	(2.00)	* * (1.71)
The clinician must be able to remove the backing papers whilst wearing gloves without the dressing 'sticking' to itself	★★★ (2.29)	★★★ (2.00)
Securing strips (where present) can be easily removed from the backing paper whilst wearing gloves	(1.86)	*** (2.43)
The dressing must be easy to correctly position in relation to the CVAD insertion area site	(2.29)	★★★ (2.00)
The dressing will not obscure the CVAD insertion site (Visibility of insertion site)	★★ (1.86)*	★★ (2.00)*
Does the dressing have an identifiable integral strip/label to record insertion date and time	✓	✓
The strip can be written on with a black ballpoint pen	(1.57)	★★★ (2.29)
Whilst removing the dressing the securement strips/device (where present) should PREVENT unnecessary movement of line ("pistoning") and continue to hold the CVAD securely in situ	★★ (1.57)*	★★ (2.00)*
On removal of the dressing, the patient should consider the procedure to be atraumatic and pain free and their skin under the dressing is of a similar condition to the surrounding skin	★★★ (1.86)	★★★ (1.43)
The outer packaging can be recycled	✓	✓

6. <u>Using the Product Assessment Results Matrix</u>

The clinical criteria displayed are designed to capture key clinical elements that health professionals may wish to consider when reviewing/selecting products for their own clinical practice. The report is intended as a guidance tool to aid product selection and is not intended to be a universal determination of the clinical effectiveness of any particular product. Each clinical practitioner should therefore make their own assessments taking into account all relevant considerations for their particular situation.

Not all clinical criteria cited in the report will be relevant or important in all environments; likewise not all clinical criteria will be relevant or important for all patient groups.

Clinicians may identify the criteria that most represent their clinical environment and patient demographic, and may choose to build their own hierarchy of importance to aid product(s) selection for patient outcome goals using the matrix presented in this report, their own clinical knowledge, as well as any other resources (including publications) to provide informed choice and transparency of their decision for product(s) being used.

It should also be noted that following initial feedback from suppliers on the original clinical criteria the question addressing the presence of a date and time strip and the ability to write on it has now been split into 2 separate criteria.

7. Further Considerations and Recommendations

7.1 Future recommendations

7.1.1. Packaging

Comments:

- There is a wide array of notable variations in the location of written and pictorial instructions printed on the box, in leaflet form, on the dressing packet or on the dressing backing paper.
- A few of the dressings had instructions on the packet or on the backing paper that did not relate to the dressing being applied.
- Application instructions on the box or in leaflet form were felt to be unhelpful as these products are often decanted from the original box in the clinical environment.

Recommendations:

- Instructions must relate to the dressing being applied.
- Instructions should be on the individual dressing packet
- o The dressing presented in a way that was intuitive to the clinical user.

7.1.2. Opening

Comments:

- Some of the dressings could not be seen through the individual dressing packets
- Several dressing packets were not able to be opened aseptically and this resulted in wastage
- Some materials used in the outer wrapper produced static and the dressings 'stuck' to the outer wrapper, preventing the dressing from being able to be removed from the wrapper aseptically.

Recommendations:

- The individual packet should be transparent on at least one side, visible enough to recognise the shape and size of the dressing.
- Dressing packets should be designed allowing clinicians to adhere to the principles of Aseptic Non-Touch Technique™ (ANTT™),

7.1.3. Clinical Use

Comments:

- It was vastly noted the issues on maintenance of skin integrity, most commonly skin irritation or skin injury at change of dressings.
- Clinicians have highlighted- 'flat film' dressings created a tunnel effect with the risk that the entry site may not be protected from bacterial ingress.
- Securement strips are used for a variety of purposes. On some dressings, despite the presence of the strips some clinicians failed to identify them or were unable to easily remove them from the dressing backing whilst wearing gloves. Securement strips were felt to be important by 75% of the clinicians that we engaged with, but some dressings did not have securement strips.
- Some dressings did not have a date and time strip and in some cases though present evaluators struggled to identify it.
- Some dressings you were unable to differentiate between the securement strips and date strips
- Some date and time strips also included an option to add the patient name which is not necessary and the addition of this limited the space for date and time
- To aid removal of the dressing, clinicians asked that the dressing should provide some form of indication or feature that would aid removal whilst wearing gloves. No dressing had features to aid removal

Recommendations:

- Further research addressing the appropriate choice of dressing type, materials used with these dressings to effectively manage sites and skin integrity.
- All dressings should include securement strips and they must be easily identifiable and removed from the dressing backing using gloves
- All dressings should include a date and time strip which is easily identifiable and removed from the dressing backing using gloves. The strip must be easy to write on clearly using a black pen.
- All dressings should include an indication for removal. This should be easily identifiable to aid any product removal, such as an edge, an arrow or a tab

7.1.4. Disposal

No recommendations identified from the evaluations.

7.2 Barcodes

The CET is aware of the Scan4Safety project and is aligned with the ambitions of the programme, which will deliver significant benefits in terms of patient safety and efficiency, to the NHS. The adoption of standards, driven by Scan4Safety, enables patient, product and location identification and traceability from the supply chain to the patient.

Adoption of these standards has also been shown to improve the quality of care by minimising the risk of human error.

The CET will be considering the inclusion of an evaluation criteria relating to the presence of GS1 compliant barcodes in future reports, as following our clinical conversations we have seen clinical staff asking for it to be included, but further information will be issued by the CET on this to stakeholders in advance.

8. <u>Disclaimer</u>

Reports published by the NHS Clinical Evaluation Team represent general guidance and the team's opinions on products are based on the clinical evaluations undertaken, using the information and clinical criteria generated from extensive stakeholder engagement in line with the team's requirements and evaluation pathway. Reports will be reviewed and updated at the team's discretion as deemed appropriate to reflect any changes.

You should make your own assessment and not take or rely on the opinions expressed by the NHS Clinical Evaluation Team, as contained in the reports, as

recommendations or advice to buy or not buy (as the case may be) particular products.

The NHS Clinical Evaluation Team is not responsible for any errors or omissions, or for the results obtained from the use of the information contained in the reports. The reports are provided 'as is', with no guarantee of completeness, accuracy or timeliness and without representation, warranty, assurance or undertaking of any kind, express or implied, including, but not limited to fitness for a particular purpose.

The NHS Clinical Evaluation Team shall not be liable to you or anyone else for any decision made or action taken in reliance on the information contained in the reports or for any consequential, special or indirect loss.

Reports are accurate at the time of publication, any recommendations or best practice guidance should be checked for updates.

9. Acknowledgements

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11. References

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Members of the Clinical Procurement Specialist Network

'Quality, safety and value are at the heart of our work and it's important that we use our clinical experience to deliver high standards of care while reducing cost and waste in the NHS.'

Mandie Sunderland Chair, Clinical Reference Board (Governing body of the NHS Clinical Evaluation Team)

