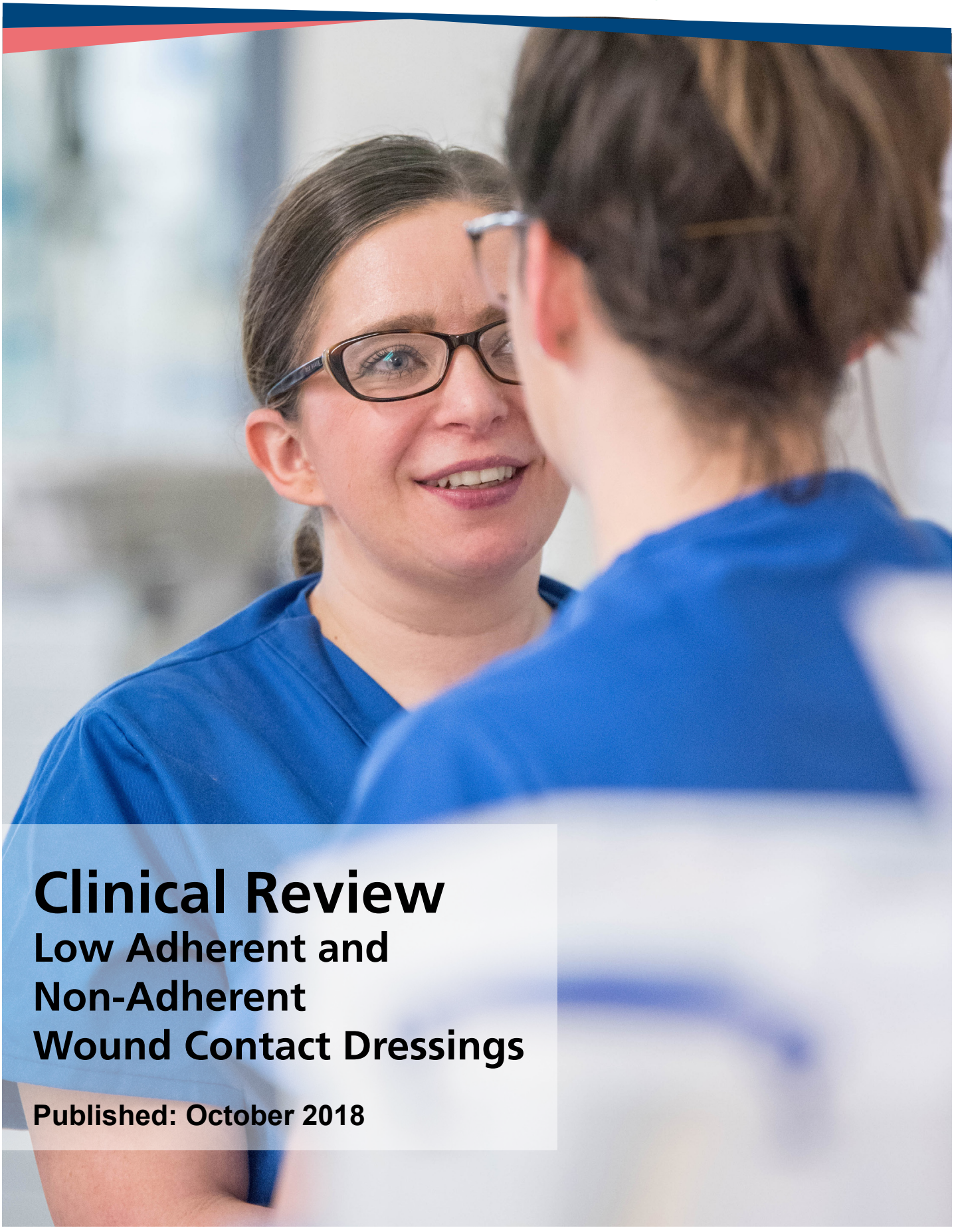
NHS Clinical Evaluation Team
by the NHS, for the NHS



Clinical Review

Low Adherent and Non-Adherent Wound Contact Dressings

Published: October 2018

Contents

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 is to add independent clinical review to 'everyday healthcare consumables' used by the NHS.

Everyday healthcare consumables are products that are found in the majority of wards, clinics, health centres, treatment rooms and district 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 Wound Contact Layers (WCLs) that are available to the NHS from the national procurement provider and secondly, to provide a clinical statement of desired functions and properties that the clinicians in the NHS require of WCLs for use in future procurement activities.

It is clear from the evidence that WCLs 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 to set 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 October 2018.

Based on 2017 data supplied by NHS Supply Chain, 325 different NHS Trusts purchased the WCLs identified in this report with a total spend approaching £8 million. This report covers the range of products available as of August 2017.

Intelligence about WCLs was gathered from a variety of sources to provide background information on the current evidence available to support the way in which the devices are designed and clinically evaluated.

Following this, clinical engagement sessions were held with the aim of identifying important clinical criteria for WCLs from frontline NHS clinicians. This information was used to develop clinical criteria for WCLs against which all brands available from the national procurement provider were reviewed.

Findings from these clinical reviews are 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 report is concerned with low adherent and non adherent wound contact dressings in the following presentations:

Low Adherent Wound Contact Dressings

Paraffin dressings. These were the first available WCL dressings, generally composed of a simple nylon or polyester layer impregnated with petrolatum or paraffin. If left in place for more than 3-4 days the impregnating compound tends to be absorbed into the secondary dressing, and to a lesser extent by the wound itself. Consequently these dressings are prone to drying out and adhering to the wound and surrounding tissue. The large apertures in the mesh like structure may allow growth of granulation tissue into the fabric thereby causing trauma on removal.

Knitted viscose dressings. A warp knitted fabric manufactured from a bright viscouse monofilament.

Polymer dressings. A woven nylon or polyester dressing

Non Adherent Wound Contact Dressings

Impregnated polymer dressings. A mixture of carboxymethylcellulose (CMC) particles combined with lipidic particles applied to a polymer fabric. The mixture when in contact with the wound bed forms a gel that facilitates atraumatic removal and enhances fluid management (Benbow and Iosson 2004, Meaume et al 2002). Impregnated dressings may prove difficult to apply as they adhere to the gloved fingers. Wear time for some of these products is indicated to be up to 7 days.

Silicone. Soft silicones are a particular family of solid silicones, which are soft and tacky. These properties enable them to conform and adhere well to dry surfaces. Such silicones have low toxicity, making adverse reactions rare, and they cannot be absorbed into the body. This makes them ideal for use in wound dressings. Soft silicone dressings are coated with a hydrophobic soft silicone layer that is tacky to touch. These dressings do not stick to the moist wound bed, but will adhere gently to the surrounding skin. They are designed to minimise trauma on removal and do not leave an adhesive residue on the skin. (Thomas 2003)

The tack (ability to stick to a surface) of soft silicone dressings relates to their ability to create multiple points of contact between the dressing and the uneven surface of the skin and wound. Wear time for some of these products is indicated to be up to 14 days.

Silicone dressings may prove difficult to apply as they adhere to the gloved fingers. Some manufacturers have addressed this by developing ‘tack’ to one side of the dressing only. Dressings with these properties are indicated in the product matrix.

Products containing antimicrobial agents have not been included.

2.2 Intended Clinical Use

Wound contact layers (WCLs) are primary dressings traditionally used to manage non-complicated acute and chronic wounds at the proliferative stage of healing. More recently WCLs have been used alongside Negative Pressure Wound Therapy to protect the wound bed from trauma associated with sub atmospheric pressure, to prevent rapidly granulating tissue from integration into wound packing materials, and to reduce pain at dressing change.

Numerous types of WCL dressings are available sharing a common basic structure comprising a thin non or low adherent layer impregnated with a variety of compounds. Low adherent and non adherent wound contact dressings are used as interface layers under secondary absorbent dressings. The dressing is intended to be placed directly on the wound bed, they are low or non-absorbent and suitable for clean, granulating, lightly exuding wounds without necrosis, and protect the wound bed from direct contact with secondary dressings. Care must be taken to avoid granulation tissue growing into the weave of the dressing. (BNF2016)

2.3 Clinical Practice

Wound contact layers are used in practice to protect granulation tissue growth and re-epithelialisation from external stress in order to promote healing (Rippon et al 2012) Low adherent wound contact dressings can be used as a primary dressing on lightly exuding wounds and granulating wounds.

2.4 Clinical Impact

Simple textile WCLs have been manufactured for many years, they are easy to use and generally of low unit cost. Traditionally tulle gras, a simple net impregnated with paraffin was used as a popular WCL, however more recently the product category has evolved to include soft silicone and combinations of hydrocolloid particles and soft paraffin. Other product lines use combinations of knitted polyester tulle with a variety of ointments or hydrocolloid. Further variants also include the addition of antimicrobial properties. Potential combinations are endless.

2.5 Other Clinical Considerations

Sensitisation may occur as with other wound care products and this must be recorded in the clinical notes.

The granulation tissue may grow into the weave of the dressing causing pain and trauma on removal. Pain is a wound care issue that should not be ignored and can cause significant physical and psychological trauma.

Wound contact layers containing soft paraffin

Wound contact dressings impregnated with soft paraffin when left on the wound bed for longer than clinically indicated may dry out and adhere to the wound causing trauma and pain on removal. These dressings should be changed on alternate days.

In 2007 following the death of a patient , the National patient Safety Agency issued a warning that products impregnated with >50% of white soft paraffin pose a safety hazard as they can easily ignite.

Dressings containing heavy load of paraffin may cause maceration as they are more occlusive in nature.

Wound contact dressings containing hydrocolloids/lipidocolloid

Hydrocolloid is not hydrophobic and so less likely to cause maceration

3. Pathway Methods

CET follows a standardised approach to evaluations. This can be found in the CET

Operating Manual on our website: www.supplychain.nhs.uk/CET.

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.

Initially, an evidence search was performed across the NICE service: https://www.evidence.nhs.uk/Search?[text]. This suggested best practice considerations in the use of WCLs.

The search terms used (see below) generated many returns however there was little new information generated.

Search criteria	Databases searched
• Wound contact dressing • Wound contact layer • Wound contact layer dressing • Low adherent dressing • None adherent dressing	• **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 – AMED, EMBASE, HMIC, BNI, Medline, PsycInfo, CINAHL, HEALTH BUSINESS ELITE databases searched)
Date Range	**Since 1975**
Language	**English**

Figure 1 Literature and other sources searches – **Wound Contact Dressings**

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. The framework covers a wider selection of products than just low adherent and non adherent wound contact 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 devices.

The specification, as used by the NHS national procurement provider (NHS Supply Chain, 2016), provides insufficient detail relating to the clinical criteria relevant for this product, but are considered in the process for the development of such criteria.

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)

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.

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 one alert (Drug Safety Update 2016) relating to this product category against the search terms previously described.

MHRA 2016: Paraffin based skin emollients on dressings or clothing: fire risk.

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.

Some suppliers provided information in the form of product brochures, technical datasheets and case studies.

3.1.5. 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 2 – 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

Recommendations for specific wound care products are not suggested within NICE Guidance issued on preventing and managing pressure ulcers and preventing, manageing diabetic foot ulceration (NICE 2014 ,2015) .

The Scottish Intercollegiate Guidelines Network (SIGN 2010, accredited by NICE) guidance on the management of chronic venous leg ulcers suggest that simple non-adherent dressings are recommended in the management of venous leg ulcers.

Dressing selection should be made after careful clinical assessment of the person's wound, their clinical condition, and their personal experience and preferences (NICE 2016).

4. NHS Clinical Engagement

In order to develop a shared vision of what is required from wound contact layers several methods of engagement were used. These events were used to formulate thoughts, ideas and needs from differing 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 that 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
- Focussed 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 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 individual experts, was assimilated into a series of clinical criteria.

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. In addition, other clinical experts who are likely to add further useful insight were also included, leading to the finalised clinical criteria of NHS requirements.

4.2.1. Criteria explanation- Inclusion

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	Rationale
The product description is identified on the external packaging as a 'wound contact layer'	Displaying the product category clearly ensures health professionals know that the product being selected is a wound contact layer
The size of dressing is displayed on the external box/packaging.	Wastage of clinical time- clear visibility of size reduces time taken for a health professional to select the correct product first time
The number of dressings contained in the packaging is displayed on the external box/packaging.	Units of distribution in WCL dressings varies widely. Clinicians require clear labelling to support stock control
The type and size of dressing can be viewed through the individual dressing packaging	To reduce wastage of time and error in selection of appropriate product size/shape.
There are instructions and product information within/on the box packaging	Information regarding the product is important for health professionals to familiarise themselves with products prior to application

Opening and Preparation Criteria	Rationale
The product instructions for use (IFU) is clear and easy to understand.	Information about application and reapplication will reduce product waste and improve clinical outcome
The product packaging can be easily and safely opened, and the product dispensed using Aseptic No Touch Technique.	Being able to open a product aseptically is a fundamental, however the ease at which this can be achieved is also important for patient experience, health professional credibility, and reducing wastage- both time and product

Clinical Use Criteria	Rationale
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	Clinicians said that this is the preferred method of application
The dressing conforms well to a digit	The application and profiling of a WCL to a digit can be challenging.
Wear time- Manufacturers guidance	clear licensed wear time optimises the wound environment, and manages the expectations of both the patient and other health professionals.
What is the aperture size? Information provided by the supplier.	Clinicians said that aperture size supported the movement of wound fluid away from the wound bed and absorbtion into a secondary dressing. Apperture size may be a consideration when blood products and viscouse exudate exist at the wound bed, and where there is a potential for granulation tissue to grow into/through the dressing fibres.
Is the dressing indicated for use with negative pressure wound therapy devices? Information provided by the supplier.	The use of negative pressure wound therapy devices is increasing in both acute and chronic wounds. WCLs are regularly used together with these medical devices. Clinicians requested clear guidance on the compatibility and safety of use of the WCL with these devices.
Is the product indicated for use in children? Information provided by the supplier.	WCL are regularly used in the management of wounds in children and babies. WCL dressings are coated with a variety of substances and clinicians request clear guidance on safety in use with this age group.
Can the product be cut to size? Information provided	Providing health care professionals with clear remit of product function and application enhances clinical

by the supplier.	use, provides greatly consistency with dressing application amongst clinicians and promotes patient confidence and concordance in health professional knowledge and ability

4.2.2. Criteria explanation- Exclusion (WCL)

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 WCL's took place.

Proposed Criteria	Rationale for Exclusion
Wound contact layer dressings containing antimicrobial agents	Some of the WCL dressings reviewed are also available with the addition of an antimicrobial. This is outside of the remit for this report.
Ease of removal and pain experience	Pain is a subjective experience, with many variables, especially if considering pain on removal of a dressing as the wound may play a significant part of any associated pain i.e. tissue type, infection, critical colonisation; for the purposes of this evaluation pain was scored specifically addressing the effect of adhesive on the peri-wound area, as such only adhesive dressings were evaluated against this criterion

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:

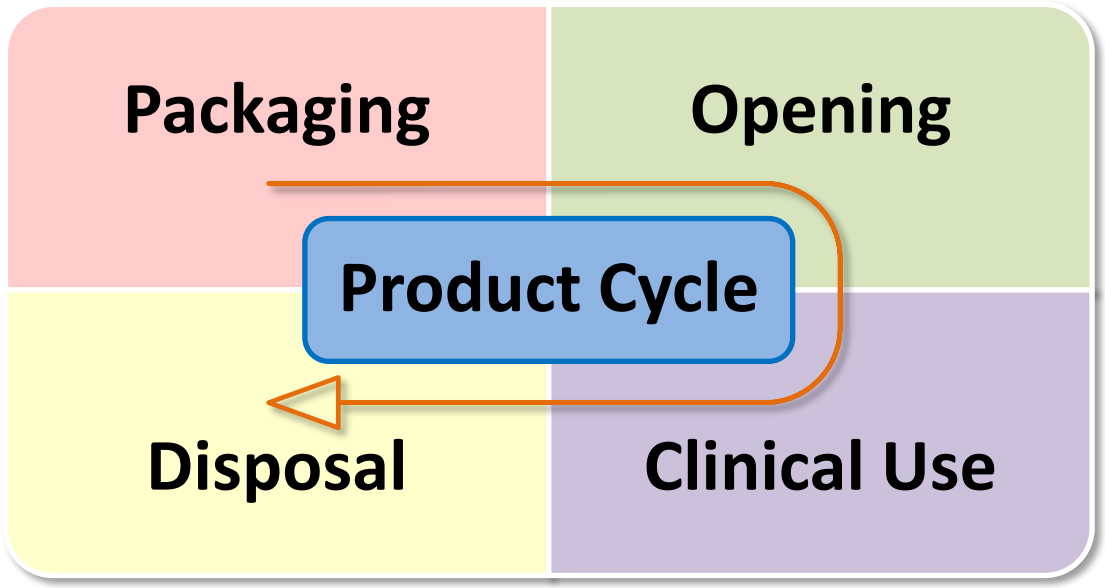


Figure 4 – NHS Clinical Evaluation Team Product Cycle

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, 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 5 – 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			Star value	
0	**to**	**0.99**	**0**	**stars**
1	**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**	**3**	**Stars**

Figure 6 – 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 7 – 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	**2 stars**

Figure 8 – 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)

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 as of August 2017.

6. Using the Product Assessment Results Matrix

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.

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.

	3M HEALTHCARE UK
NON-ADHERENT WOUND CONTACT DRESSINGS NHS Clinical Evaluation Team by the NHS, for the NHS	
BRAND	**TEGADERM**
SIZE	**7.5 x 10**
Recommended Wear Time	**Up to 7 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**
Size of the aperture (if applicable)?	**90 microns**
Can the product be safely cut to size?	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**N/A**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✓
Instructions for use are contained within the packaging	✓
The product instructions for use (IFU) is clear and easy to understand	★★½☆ (1.57)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★☆ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	☆☆ (0.29)*

*Maximum number of 2 stars attainable

	ACTIVA HEALTHCARE
NON-ADHERENT WOUND CONTACT DRESSINGS NHS Clinical Evaluation Team by the NHS, for the NHS	
BRAND	**LOMATUELL PRO.**
SIZE	**10 x 10cm**
Recommended Wear Time	**1-3 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**
Size of the aperture (if applicable)?	**1mm**
Can the product be safely cut to size?	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**N/A**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗
Instructions for use are contained within the packaging	✓
The product instructions for use (IFU) is clear and easy to understand	★★½☆ (1.71)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★★½ (2.29)
Does the product instruction for use confirm that the dressing can be cut to size?	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	★★ (1.71)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

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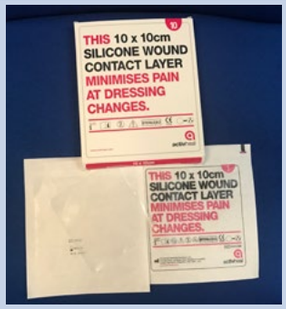
	ADVANCED MEDICAL SOLUTIONS
	
BRAND	**ACTIVHEAL**
SIZE	**10 x 10cm**
Recommended Wear Time	**14 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**
Size of the aperture (if applicable)?	**1.6mm x 1.2mm**
Can the product be safely cut to size?	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**No**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗
Instructions for use are contained within the packaging	✗
The product instructions for use (IFU) is clear and easy to understand	★★☆ (2.00)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★½☆ (1.43)
Does the product instruction for use confirm that the dressing can be cut to size?	✗
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

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	ADVANCIS MEDICAL
	
BRAND	**SILFLEX**
SIZE	**8cm x 10cm**
Recommended Wear Time	**up to 14 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**
Size of the aperture (if applicable)?	**1.5 – 2.0mm**
Can the product be safely cut to size?	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**No**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗
Instructions for use are contained within the packaging	✓
The product instructions for use (IFU) is clear and easy to understand	★★½ (2.43)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★½ (2.29)
Does the product instruction for use confirm that the dressing can be cut to size?	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (1.88)*
The dressing conforms well to a digit	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
by the NHS, for the NHS

	ASPEN MEDICAL EUROPE
	
BRAND	**GENTILTAC**
SIZE	**8 x 10cm**
Recommended Wear Time	**up to 14 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**
Size of the aperture (if applicable)?	**2mm**
Can the product be safely cut to size?	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**Yes**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✓
Instructions for use are contained within the packaging	✗
The product instructions for use (IFU) is clear and easy to understand	★★★ (0.00) No IFU
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★★ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✗
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*

*Maximum number of 2 stars attainable

	B BRAUN MEDICAL LTD
NON-ADHERENT WOUND CONTACT DRESSINGS NHS Clinical Evaluation Team by the NHS, for the NHS	
BRAND	**ASKINA**
SIZE	**7.5 x 10**
Recommended Wear Time	**7 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**
Size of the aperture (if applicable)?	**1.27mm – 1.37mm**
Can the product be safely cut to size?	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**No**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✓
Instructions for use are contained within the packaging	✓
The product instructions for use (IFU) is clear and easy to understand	★★☆ (1.57)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★★ (2.29)
Does the product instruction for use confirm that the dressing can be cut to size?	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
by the NHS, for the NHS

	BSN MEDICAL	
		
BRAND	**CUTICELL CONTACT**	**CUTICELL CLASSIC**
SIZE	**7.5 x 10**	**10 x 10cm**
Recommended Wear Time	**up to 14 days**	**Clinical Judgement (see IFU)**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**	**N/A (Open weave cotton gauze)**
Size of the aperture (if applicable)?	**1.55mm**	**N/A**
Can the product be safely cut to size?	**Yes**	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**	**No Information**
Does the product have one sided tac (silicone wound contact dressing)?	**Yes**	**N/A**
CLINICAL CRITERIA	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓	✗
The size of dressing is displayed on the external box/packaging.	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✓	✗
Instructions for use are contained within the packaging	✓	✓
The product instructions for use (IFU) is clear and easy to understand	★★½ (2.71)	★★☆ (2.00)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★☆ (2.00)	★★½ (2.29)
Does the product instruction for use confirm that the dressing can be cut to size?	✗	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (1.86)*	★★ (1.86)*
The dressing conforms well to a digit	★★ (2.00)*	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
by the NHS, for the NHS

	H & R HEALTHCARE		
			
BRAND	**VASELINE KENDALL**	**TELFA CLEAR**	**KLINIDERM SILICONE**
SIZE	**15.24 x 91.44 strip**	**7.5 x 7.5**	**7.5 x 10**
Recommended Wear Time	**No Information**	**Not provided**	**Up to 14 days**
Apertures present to allow fluid to pass into a secondary dressing?	**No Information**	**Yes**	**Yes**
Size of the aperture (if applicable)?	**No Information**	**0.25mm**	**1mm**
Can the product be safely cut to size?	**No Information**	**Yes**	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**No Information**	**Yes**	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**N/A**	**N/A**	**Yes**
CLINICAL CRITERIA	**Score**	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✗	✗	✓
The size of dressing is displayed on the external box/packaging.	✓	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗	✓	✓
Instructions for use are contained within the packaging	✓	✗	✓
The product instructions for use (IFU) is clear and easy to understand	★★☆ (2.00)	☆☆☆ (0.00) No IFU	★½☆ (1.71)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	N/A	★★½ (2.29)	★★☆ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✓	✗	✗
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	N/A	★★ (2.00)*	★★ (1.86)*
The dressing conforms well to a digit	★★ (1.71)*	★½ (1.43)*	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
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	KCI MEDICAL LTD		
			
BRAND	**N-A ULTRA**	**N-A DRESSING**	**ADAPTIC TOUCH**
SIZE	**9.5 x 9.5cm**	**9.5 x 9.5cm**	**7.6 x 11cm**
Recommended Wear Time	**Clinical Judgement**	**Clinical Judgement**	**Clinical Judgement**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**	**Yes**	**Yes**
Size of the aperture (if applicable)?	**Not Specified**	**Not specified**	**Single pore 0.31mm²**
Can the product be safely cut to size?	**Yes**	**Yes**	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**No**	**No**	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**No**	**N/A**	**No**
CLINICAL CRITERIA	**Score**	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓	✓	✗
The size of dressing is displayed on the external box/packaging.	✓	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗	✗	✗
Instructions for use are contained within the packaging	✗	✗	✓
The product instructions for use (IFU) is clear and easy to understand	★★☆ (2.00)	★★☆ (2.00)	★★☆ (2.00)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★☆ (2.00)	★★☆ (2.00)	★★☆ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✗	✗	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*	★★ (2.00)*	★★ (2.00)*
The dressing conforms well to a digit	☆☆ (0.00)*	☆☆ (0.00)*	★★ (2.00)*

*Maximum number of 2 stars attainable

	MEDICARE COLGATE LTD
NON-ADHERENT WOUND CONTACT DRESSINGS NHS Clinical Evaluation Team by the NHS, for the NHS	
BRAND	**FARMACTIVE**
SIZE	**8 x 10cm**
Recommended Wear Time	**No Information**
Apertures present to allow fluid to pass into a secondary dressing?	**No Information**
Size of the aperture (if applicable)?	**No Information**
Can the product be safely cut to size?	**No Information**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**No Information**
Does the product have one sided tac (silicone wound contact dressing)?	**No**
CLINICAL CRITERIA	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗
Instructions for use are contained within the packaging	✓
The product instructions for use (IFU) is clear and easy to understand	★★☆ (2.00)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★☆ (1.86)
Does the product instruction for use confirm that the dressing can be cut to size?	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
by the NHS, for the NHS

	MOLNLYCKE HEALTHCARE	
		
BRAND	**MEPITEL**	**MEPITEL ONE**
SIZE	**8 x 10cm**	**9 x 10cm**
Recommended Wear Time	**Up to 14 days**	**Up to 14 days**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**	**Yes**
Size of the aperture (if applicable)?	**1.08mm**	**1.03mm with 10 micron tolerance**
Can the product be safely cut to size?	**Yes**	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**No**	**Yes**
CLINICAL CRITERIA	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓	✓
The size of dressing is displayed on the external box/packaging.	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗	✓
Instructions for use are contained within the packaging	✓	✓
The product instructions for use (IFU) is clear and easy to understand	★★☆ (2.00)	★★½ (2.29)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★☆ (2.00)	★★☆ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✓	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*	★★ (1.88)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
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	PAUL HARTMANN LTD	
		
BRAND	**ATRAUMAN**	**ATRAUMAN SILICONE**
SIZE	**7.5 x 10cm**	**7.5 x 10cm**
Recommended Wear Time	**clinical judgement**	**not specified**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**	**Yes**
Size of the aperture (if applicable)?	**1mm**	**0.87mm**
Can the product be safely cut to size?	**Yes**	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**	**Yes**
Does the product have one sided tac (silicone wound contact dressing)?	**N/A**	**No**
CLINICAL CRITERIA	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✗	✓
The size of dressing is displayed on the external box/packaging.	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗	✓
Instructions for use are contained within the packaging	✓	✓
The product instructions for use (IFU) is clear and easy to understand	★★½☆ (1.71)	★★☆ (2.14)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	N/A	★★½ (2.29)
Does the product instruction for use confirm that the dressing can be cut to size?	✓	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★½ (1.43)*	★★ (2.00)*
The dressing conforms well to a digit	★★ (1.57)*	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
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	RICHARDSON HEALTHCARE
	
BRAND	SilTact
SIZE	8 x 10cm
Recommended Wear Time	No Information
Apertures present to allow fluid to pass into a secondary dressing?	No Information
Size of the aperture (if applicable)?	No Information
Can the product be safely cut to size?	No Information
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	No Information
Does the product have one sided tac (silicone wound contact dressing)?	Yes
CLINICAL CRITERIA	Score
The product description is identified on the external packaging as a 'wound contact layer'	✓
The size of dressing is displayed on the external box/packaging.	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓
The type and size of dressing can be viewed through the individual dressing packaging	✓
Instructions for use are contained within the packaging	✓
The product instructions for use (IFU) is clear and easy to understand	★★½ (2.29)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★☆ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
by the NHS, for the NHS

	SMITH & NEPHEW	
		
BRAND	**TRICOTEX**	**JELONET**
SIZE	**9.5 x 9.5**	**10 x 10cm**
Recommended Wear Time	**7 days**	**Clinical Judgement (see IFU)**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**	**Yes**
Size of the aperture (if applicable)?	**0.3-0.8mm**	**not specified**
Can the product be safely cut to size?	**Yes**	**Yes**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**No**	**No**
Does the product have one sided tac (silicone wound contact dressing)?	**N/A**	**N/A**
CLINICAL CRITERIA	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓	✗
The size of dressing is displayed on the external box/packaging.	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✗	✗
Instructions for use are contained within the packaging	✗	✗
The product instructions for use (IFU) is clear and easy to understand	★★★ (0.00) No IFU	★★★ (0.00) No IFU
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★★ (2.00)	★★★ (2.29)
Does the product instruction for use confirm that the dressing can be cut to size?	✗	✗
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*	★★ (2.00)*
The dressing conforms well to a digit	★★ (0.00)*	★★ (2.00)*

*Maximum number of 2 stars attainable

NON-ADHERENT WOUND CONTACT DRESSINGS

NHS Clinical Evaluation Team
by the NHS, for the NHS

	URGO LTD	
		
BRAND	**URGOTUL**	**URGOSTART CONTACT**
SIZE	**10 x 10cm**	**10 x 10cm**
Recommended Wear Time	**7 days**	**No Information**
Apertures present to allow fluid to pass into a secondary dressing?	**Yes**	**No Information**
Size of the aperture (if applicable)?	**0.58mm**	**No Information**
Can the product be safely cut to size?	**Yes**	**No Information**
Can the product be used safely in conjunction with Negative Pressure Wound Therapy systems?	**Yes**	**No Information**
Does the product have one sided tac (silicone wound contact dressing)?	**N/A**	**N/A**
CLINICAL CRITERIA	**Score**	**Score**
The product description is identified on the external packaging as a 'wound contact layer'	✓	✓
The size of dressing is displayed on the external box/packaging.	✓	✓
The number of dressings contained in the packaging is displayed on the external box/ packaging.	✓	✓
The type and size of dressing can be viewed through the individual dressing packaging	✓	✓
Instructions for use are contained within the packaging	✓	✓
The product instructions for use (IFU) is clear and easy to understand	★★★ (2.00)	★★★ (2.00)
The product packaging can be easily and safely opened and the product dispensed using Aseptic No Touch Technique.	★★½ (1.71)	★★★ (2.00)
Does the product instruction for use confirm that the dressing can be cut to size?	✓	✓
The dressing can be removed from the packaging with a gloved hand and easily applied to the skin	★★ (2.00)*	★★ (2.00)*
The dressing conforms well to a digit	★★ (2.00)*	★★ (1.71)*

*Maximum number of 2 stars attainable

7. Further Considerations and Recommendations

7.1 Packaging

- Include information with reference to safety in combination with negative pressure wound therapy
- Indication of aperture size to enable the clinician to make an appropriate choice of wound contact dressing in relation to exudate and speed of tissue granulation

7.2 Barcodes

The CET are aware of the Scan4Safety project and are 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. Disclaimer

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.

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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.

9. Acknowledgements

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References

Benbow M and Iosson G (2004), A clinical evaluation of Urgotul to treat acute and chronic wounds. *British Journal of Nursing* 13(10)409-413.

British National Formulary (2016). Pg1294

Drug safety update 2016, Vol 9 (9) April 2016:9

Meaume S, Senet P, Dumas R, Carsin H, Pannier M, ohbot S. (2002) Urgotul: a novel non adhesive lipocolloid dressing. *British Journal of Nursing.*11 (suppl 3) S42-S50

NICE (2014) Pressure ulcers: prevention and management Clinical guideline [CG179] https://www.nice.org.uk/guidance/cg179

NICE (2015) Diabetic foot problems: prevention and management NICE guideline [NG19] https://www.nice.org.uk/guidance/ng19

NICE (2016) Chronic wounds: advanced wound dressings and antimicrobial dressings . https://www.nice.org.uk/advice/esmpb2/chapter/Key-points-from-the-evidence

Rippon M, DaviesP, and White R. (2012). Taking the trauma out of wound care the importance of undisturbed healing. *Journal of Wound Care:* 21(8); 359-368.

SIGN (2010) Manangement of chronic venous leg ulcers . a national clinical guideline https://www.sign.ac.uk/sign -120-management-of-chronic-venous-leg-ulcers.html

Thomas S. (2003) Soft silicone dressings: frequently asked questions. *WorldWideWounds.* Available from: http://www. worldwidewounds.com/2003/october/ Thomas/Soft-Silicone-FAQ.html

Jones AM and San Miguel L. Are modern wound dressings a clinical and cost effective alternative to the use of gauze. *Journal of Wound Care:* 2006 15(2) 65-9

‘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)