GB. Instructions for use
FR. Notice d’Utilisation
DE. Gebrauchsanweisung
ES. Instrucciones de uso
PT. Modo de Emprego
IT. Istruzioni per l’uso
DK. Brugsvejledning
FI. Käyttöohjeet
SE. Bruksanvisning
NO. Bruksinstruksjoner
NL. Gebruiksaanwijzingen
PL. Sposób użycia
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GR. Οδηγίες χρήσεως
**GB. Sorbsan™ Packing/Ribbon**

**Sterile Calcium Alginate Cavity Wound Dressings**

**PRODUCT DESCRIPTION:**
Sorbsan Ribbon and Packing are sterile non-woven calcium alginate cavity wound dressings, high in Mannuronic acid and low in Gulluronic acid.

**PRODUCT INFORMATION:**
- The fibres of Sorbsan ribbon and packing swell and form a sodium-calcium alginate gel in contact with wound exudate. This gel:
  - Provides a moist wound healing environment;
  - Frustrating wound healing;
  - Conforms to the contours of the wound;
  - Allows gaseous exchange;
  - Draws contaminating bacteria into the dressing, and away from the wound, along with the exudate;
  - Minimises pain on dressing removal;
  - Minimises disruption to newly formed tissue on dressing removal;
  - Allows the dressing to be easily removed by irrigating with saline (0.9%) solution;
  - Upon contact with a bleeding wound, Sorbsan Ribbon/Packing will promote haemostasis;
  - Sorbsan Ribbon/Packing is not intended to be used as a surgical sponge;
  - Sorbsan Ribbon and Packing are supplied with a sterile plastic medical probe (single use only) to aid with assessment of the wound dimensions.

**INDICATIONS FOR USE:**
- Sorbsan Ribbon and Packing wound dressings may be used in cavity wounds where there is a moderate to high level of exudate;
- Sorbsan Ribbon is suitable for the management of larger, wet cavity wounds;
- Sorbsan Ribbon is suitable for use in smaller, wet cavity wounds such as sinuses and fistulas.

If the wound is not producing high enough exudate levels to gel the Sorbsan dressing’s fibres, it may be appropriate to change to a different dressing type.

**Sorbsan Ribbon and Packing are suitable for the management of abscesses, sinuses’ and fistulas resulting from:***
- Pilonidal sinus;
- Pressure ulcers;
- Post-operative wounds;
- Fungating lesions.

**Sorbsan Ribbon and Packing are also suitable for the management of bleeding cavity wounds:**
- Following toe-nail avulsions;
- Pressure ulcers;
- Donor and graft sites;
- Traumatic wounds.

**CONTRAINDICATIONS:**
- Do not use on patients with a known sensitivity to Sorbsan Ribbon/Sorbsan Packing dressings, or any of their components.
- Sorbsan Ribbon/Packing may be used on wounds which are clinically infected when:
  - A medical practitioner is consulted;
  - Current wound treatment protocols are reviewed;
  - Underlying causes are addressed;
  - Appropriate anti microbial therapy is given when so directed;
  - Sorbsan is changed daily to allow visual inspection of the wound.

No data is available to support the use of topical medicinal preparations in conjunction with Sorbsan ribbon and packing.

In the early stages of Sorbsan use, the wound may appear to increase in size. This is to be expected as the moist wound environment encourages autolytic debridement prior to granulation tissue formation and wound healing.

In common with other hydrophilic wound dressings, an initial “drawing” sensation may be experienced shortly after application of Sorbsan. Wetting the wound with sterile saline 0.9% immediately before dressing application may help prevent this discomfort.

As healing progresses and the wound becomes smaller less exudate is generally produced. If the wound is not producing enough exudate to gel Sorbsan’s fibres, a different dressing choice should be considered, in line with existing clinical protocols.

In the management of exuding wounds, Sorbsan can only make the overlying condition conducive to healing. If after 4-6 weeks of using Sorbsan there has been no improvement, the original diagnosis should be reassessed and current treatment practices should be reviewed in line with existing clinical protocols.

**METHOD OF USE:**
- Take existing clinical protocols to clean/debride the wound in preparation for the application of Sorbsan Ribbon and Packing dressings;
- Assess the wound in order to determine the most appropriate sized dressing for the size and shape of the cavity.

**DRESSING APPLICATION:**
- **Sorbsan Packing**:
  - Assess the wound using the sterile medical probe provided;
  - Insert the Sorbsan Packing dressing directly into the wound cavity;
  - Do not pack the wound tightly;
  - Ensure that a small length (2cm) of dressing remains protruding from the cavity;
  - Apply an appropriate secondary dressing over Sorbsan packing to prevent drying out, and secure with tape or bandage using existing clinical protocols;
  - The appropriate choice of secondary dressing is dependent upon the amount of exudate produced by the wound.

- **Sorbsan Ribbon**:
  - Assess the wound using the sterile medical probe provided;
  - If the opening of the sinus is smaller than the width of the probe, wound treatment protocols should be re-evaluated, as accurate assessment cannot be made;
  - Insert the Sorbsan Ribbon dressing directly into the wound cavity;
  - Do not pack the wound tightly;
  - Ensure that a small length (2cm) of dressing remains protruding from the cavity;
  - Apply an appropriate secondary dressing over Sorbsan Ribbon to prevent drying out, secure with tape or bandage using existing clinical protocols.

**DRESSING WEAR TIME:**
- The appropriate choice of secondary dressing is dependent upon the amount of exudate produced by the wound.

**DRESSING WEAR TIME:**
- If the secondary dressing needs changing due to exudate leakage, Sorbsan Ribbon and Packing should also be changed.
- It may be necessary at first, when the exudate levels are at their highest, to change Sorbsan Ribbon and Packing dressings daily.
- Where clinically appropriate, the frequency of dressing changes may be reduced as the exudate levels decrease.
- When exudate levels are low, good clinical practice indicates that wound dressings should be replaced at least once every seven days. This enables assessment of wound condition, and thus a review of the effectiveness of current treatment practices, to be made.
- In wounds where clinical infection is observed Sorbsan should be changed daily to allow visual inspection of the wound. Always consult a medical practitioner, review the current wound treatment protocols, address the underlying causes and instigate appropriate antimicrobial therapy when so directed.
- Once haemostasis has been achieved the wound and the dressing choice should be re-assessed.
- In the management of bleeding wounds the dressing should be changed after a maximum of three days or use in line with existing clinical protocols.

**DRESSING REMOVAL:**
- Remove the secondary dressing using existing clinical protocols.
- To remove Sorbsan Ribbon and Packing calcium alginate from the wound, gently pull the protruding length of dressing to lift the non-gelled part of the dressing from the wound.
- Irrigate the wound with sterile saline (0.9%) solution to remove Sorbsan gel left in the wound site.
- Use existing clinical protocols to clean the wound in order to remove any remaining exudate residue before wound assessment or the application of further dressings.

**PRESENTATIONS:**
- Packs containing dressings are individually sealed in peel-open cartons.

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**Dressing**

<table>
<thead>
<tr>
<th>Size</th>
<th>Dressings per inner box</th>
<th>Catalogue Code</th>
<th>Pip Code</th>
<th>NHS Logistics Code</th>
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</thead>
<tbody>
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<td>Sorbsan Packing (with sterile medical probe):</td>
<td>30cm 5</td>
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<td>034-8979</td>
<td>ELS213</td>
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<td>Sorbsan Ribbon (with sterile medical probe):</td>
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<td>003-5212</td>
<td>ELS016</td>
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</tbody>
</table>

All available on UK Drug Tariff and through NHS Logistics.