

Burn Care: ACTICOAT Flex use for Acute Burn Care (Adult)

Site Applicability

All VCH & PHC Acute sites

Practice Level

Basic Skills for the following professions (within their respective scope of practice):

- NP, RN, RPN, LPN

Goal:

The goal of burn wound care with ACTICOAT Flex is:

- Decrease bacterial growth in the burn wound
- Maintenance of a moist wound healing environment
- Decrease in patient discomfort/pain from frequent dressing changes
- Minimize further tissue damage
- Promote wound healing

Need to Know

ACTICOAT Flex is a single layer open mesh antimicrobial nanocrystalline silver dressing. It is available in a variety of sizes and two types: ACTICOAT Flex 3 and ACTICOAT Flex 7. The antimicrobial protection is effective within 30 minutes of application and is sustained for a varying amount of time dependent on the ACTICOAT Flex product used.

Indications for burn care:

- Dermal and full thickness burn wounds that show signs and symptoms of local wound infection or are at risk for developing a local wound infection
- Infected skin donor sites
- As an interface, at the time of skin grafting, between new skin grafts and the cover dressing where antimicrobial action is desired
- Can be used with negative pressure wound therapy (NPWT)
- Can be used for pregnant and nursing women

Precautions:

- ACTICOAT Flex must not come into contact with electrodes or conductive gels
- Transient pain/stinging may be experienced on application but can be minimized by following recommended procedure and using appropriate analgesics before and during dressing changes.
- ACTICOAT Flex colour may vary from piece to piece, however, each piece should be uniform in colour on both sides. Do not use any non-uniformly coloured ACTICOAT Flex pieces

Contraindications:

- Do not use with MRI examinations. Remove just prior to MRI examination and apply an alternative temporary dressing.
- Do not use with known sensitivity or allergy to silver or polyester.
- Do not use on exposed internal organs.
- Do not use with radiation therapy. Remove just prior to scheduled radiation therapy and apply an alternative temporary dressing.
- Do not use saline based products to activate, moisten or to cover the product as product efficiency may be altered.

- Do not use in **direct** contact with zinc based products (Viscopaste™)
- Do not use in **direct** contact with oil-based products or their residue (including other antimicrobial creams [Flamazine™], paraffin [Jelonet™] or petrolatum products [Adaptic®])

General Product Information:

ACTICOAT Flex:

- must be in contact with the wound bed to be effective.
- is activated by moisture, including wound exudate.
- is compatible with water based gels (i.e. Intrasite™).
- will not harm intact skin but may cause temporary staining to peri-wound skin.
- that is too wet may cause maceration of surrounding tissue and will decrease effectiveness of the active silver.
- ACTICOAT Flex 3 is changed every 3 days or as per physician order.
- ACTICOAT Flex 7 is changed every 7 days or as per physician order.
- requires a secondary dressing to absorb the exudate and maintain a moist wound healing environment.
- use silicone based products to protect healed grafts from maceration if ACTICOAT is being applied to open areas surrounded by recently grafted areas.
- can be used in the Hyperbaric Chamber and with CT Scan procedures

Equipment & Supplies

For removal of old dressing and wound cleansing:

- Tap water
Note: Tap water used in this procedure is municipally treated tap water. If water source is not municipally treated use sterile water or boil water source prior to using.
- Wound cleansing solution of choice as per hospital/health authority policy (with the exception of saline based products – see [contraindications](#) above)
- Non sterile woven gauze
- Non sterile bowl
- Instrument pack containing scissors and forceps
- Mask with eye protection, non sterile gloves, non-sterile gown

For application of new dressing:

- Sterile dressing tray, sterile metal tray or large sterile drape sufficient to create sterile field for dressing materials and supplies
- ACTICOAT Flex to fit the size of the wound bed
- Sterile scissors
- Sterile water
- Sterile bowl
- Sterile drape to fit under wound
- Sterile gauze to cover the wound
- Sterile gauze wrap (Kling) - *optional*
- Moisture retentive layer (i.e. Water resistant pads, plastic wrap, glove, transparent dressing, bordered cover dressing)
- Tape
- Water based gel (i.e. INTRASITE™) - *optional*
- Mask with eye protection, sterile gown, sterile gloves
- Silicone mesh dressing (i.e. Mepitel®) - *optional*
- Elastic net dressing – *optional*

Procedure

Preparation:

1. Administer analgesics, sedation and/or anxiolytics prior to and during treatment as necessary.
2. Keep patient warm during procedure (i.e. increase room heat, use warm blankets or warming blanket)

Removal of Old Dressing (Clean Procedure):

1. Don appropriate personal protective equipment (PPE) should be worn when performing wound care to protect the caregiver(s) from blood and body fluid exposure. PPE should include a mask with eye protection, non-sterile gown, non-sterile gloves and hat.
2. Removal of old dressing(s) and cleaning the wound is a clean procedure.
3. Procedure may occur at the bedside or in a bathing area (i.e. shower, tub room).
4. Avoid pulling old adherent dressings from wound bed as healing cells may be damaged - flush with tap water or compress with tap water soaked gauze to aid in removal.
5. Gently remove old ACTICOAT Flex dressings using forceps or gloved hands.

Cleansing and Assessment of Burn Wound (Clean Procedure):

1. Using tap water, wound cleansing solution of choice, and non-sterile gauze. gently cleanse the burn wound using the texture of the gauze to help remove loose tissue, debris and/or any other topical dressing material used on or around wound.
2. When the gauze becomes fully soiled, discard and use a new gauze.
3. If the wound requires removal of blisters and/or devitalized tissue, please review CPD: Burn Wound Bed Preparation and Blister Management in the Acute Adult Burn. (*in process*)
4. If dressing application is delayed, cover the wounds with a compress to prevent desiccation.

Application of ACTICOAT Flex Dressing (Sterile Procedure):

1. Prepare sterile dressing tray, by opening all supplies prior to exposing wound.
2. Expose wound bed and open enough ACTICOAT Flex to cover the wound and add to the sterile dressing tray.
3. Pour enough sterile water into bowl to moisten any gauze required for the cover dressing.
4. Wear sterile gloves, sterile gown and mask with eye protection for the remainder of the procedure.
5. Change sterile gloves as necessary.
6. Place sterile drape beneath wound to be dressed.
7. Cut ACTICOAT Flex to fit size and shape of wound. Avoid overlapping pieces, using only as much as needed
8. If the wound bed has moderate to large amounts of exudate, apply either side of the **dry** ACTICOAT Flex to the wound bed.
9. If the wound bed is dry or only has a small amount of exudate, apply a 1 to 2 mm layer of water soluble gel directly to the wound bed or to the ACTICOAT Flex.
10. Using water based gel between the ACTICOAT Flex and the wound bed can help to reduce stinging in those patients who report pain with dressing application.
11. Apply a thin layer of sterile water-dampened gauze over the ACTICOAT Flex. Dressings should be moist but not wet.
12. Cover only the ACTICOAT Flex with the sterile water-dampened gauze to prevent maceration of the peri-wound skin.
13. Secure loosely with kling wrap.
14. Place a moisture retentive cover dressing over the Acticoat Flex and gauze layer to retain moisture in the dressing (i.e. blue incontinence pads, Saran wrap, acrylic dressing, bordered occlusive dressing).
15. Secure with elastic net dressing if necessary.

16. **If wound is small and has intact peri-wound skin:** The use of the gauze wrap dressing and waterproof barrier may be eliminated. The ACTICOAT Flex and sterile water-dampened gauze may be secured using a transparent adhesive dressing or a bordered foam dressing to secure in place.
17. Do Not apply dressings with adhesive to newly grafted areas, newly epithelialized skin or excoriated tissues as damaged to these areas may occur upon dressing removal.

Care of ACTICOAT Flex Dressings:

1. Do not allow ACTICOAT Flex to dry out, the effectiveness of available silver will be reduced.
2. Remove outer water resistant layer every 12 hours and assess for dampness of dressing. If dry, moisten lightly with sterile water, wrap with clean outer water retentive layer and secure with tape. Dressing should be damp but not wet.
3. If using an adhesive transparent drape, check the dressing Q shift to ensure it appears moist. Replace water dampened gauze and transparent drape only if the dressing appears dry under the transparent drape.
4. Wounds with heavy exudate may require more frequent changes to the secondary cover dressings to prevent maceration.

Site Specific Practices

VGH (BPTU):

BPTU uses Chlorhexidine Gluconate 2% Soap (Germi-Stat Gel 2%) as the wound cleansing agent of choice.

Patient/Client/Resident Education

1. Explain dressing purpose and procedure to patient
2. Explain post application care/activities
3. Explain pain management strategies
4. Inform patient of temporary staining caused by ACTICOAT Flex use
5. If patient is being discharged, explain follow-up routines for future dressing changes

Documentation

1. Document burn wound assessments and treatments as per Hospital/Health Authority policy.
2. Document adverse reactions as they occur in the Progress Notes and as per Agency/Health Authority policy.
3. Document all pain assessments and analgesic administration as per Agency/Healthy Authority policy.
4. Update/revise patient care plan once per shift or as required.
5. Document the date of next dressing change as per Hospital/Health Authority policy.
6. Document any patient specific procedural concerns in the Progress Notes.

Related Documents

- Acute Burn Care including Initial Assessment and Resuscitation (*in development*)
- B-151: [Facial Care for Burns](#)
- G-130: [Autografts in Burn Care – Management of](#)
- B-140: [Application of a Topical Antimicrobial Cream Dressing \(Flazamine®\) to a Burn Wound](#)
- D-130: [Donor Site Care for Burns](#)

References

Product Information:

- ACTICOAT Flex/ INTRASITE Gel/Jelonet/Flamazine/Viscopaste/Opsite are TM of Smith and Nephew
- †Nanocrystalline Silver is a patented technology of NUCRYST Pharmaceuticals Corp.
- Mepitel is a ® of Molnlycke Health Care
- Adaptic is a ® of Systagenix
- Germi-Stat Gel 2% is a ® of Cardinal Health Canada

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VCH: (Regional SharePoint 2nd Reading)

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