

**SORBSAN<sup>®</sup> FLAT**

**UMT**  
Medical

Sterile Calcium Alginate Wound Dressing

REF 1400,1410,1415

### INSTRUCTIONS FOR USE



Rev. UMT V1

  
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#### PRODUCT DESCRIPTION:

Sorbsan Flat is a sterile, non-woven, calcium alginate wound dressing, high in Mannuronic acid and low in Guluronic acid. The fibres of Sorbsan well and form a Sodium-Calcium alginate gel in contact with wound exudate. The gel:

- Provides a 'moist wound healing environment'
- Conforms to the contours of the wound
- Minimises pain on dressing removal
- Minimises disruption to newly formed tissue on dressing removal
- Upon contact with a bleeding wound, Sorbsan Flat will promote hemostasis

#### INDICATIONS FOR USE:

Wound dressing intended for use on breached dermis, where the wounds can heal only by secondary intention:  
Suitable for following wound types:

- Wound types such as flat or shallow
- Wounds with moderate to high exudate levels

Sorbsan may also be used in conjunction with graduated compression therapy for the management of venous leg ulceration, when directed and under continuing wound assessment by qualified professionals. Sorbsan may be used on wounds which are clinically infected only when advised by a qualified professional after a full and continuing wound assessment.

#### CONTRAINDICATIONS:

The Sorbsan wound dressing is not intended for:

- Use on patients with a known sensitivity to Calcium Alginate dressings
- Use with heavily bleeding wounds
- Dry wounds
- Surgical implantation
- Used under gauze

#### WARNINGS/OBSERVATIONS:

Sorbsan is a sterile, single use product. Do not use if the packaging has been opened or damaged as this could compromise the sterility of the dressing. Sorbsan should not be used with heavily bleeding wounds.

Should consult a healthcare professional if irritation (reddening, inflammation), maceration (whitening of skin), hyper-granulation (excess tissue formation) is observed.

The dressing may adhere if used on very lightly exuding wounds. If the dressing is not easily removed, moisten it with saline solution prior to removal.

The dressing is not intended for use as a surgical sponge and is not intended to control heavy bleeding. Alternative measures must be considered in those emergency situations where exceptional blood loss.

When used for multiple applications, device is intended to have a contact period of less than or equal to 30 days.

Do not use on patients with a known sensitivity to alginates.

For external use only.

#### METHOD OF USE:

Sorbsan should be applied as advised by a qualified professional after a full and continuing wound assessment.

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.

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

Always use aseptic techniques.

#### PREPARATION:

- Use existing clinical protocols to clean/debride the wound in preparation for the application of Sorbsan dressings.
- Select a dressing that is of a suitable size and shape.
- Ensure a 5mm overlap around the wound edge to allow for the dressing gelling and conforming to the wound.

#### DRESSING APPLICATION:

- Apply the dressing centrally over the wound bed.
- Cover with an appropriate secondary dressing as directed by qualified professional or by existing clinical protocols.

#### DRESSING WEAR TIME:

- If the secondary needs changing due to exudate leakage, Sorbsan Flat should also be changed.
- It may be necessary at first, when the exudate levels are at their highest, to change Sorbsan Flat daily.
- Where clinically appropriate, the frequency of dressing changes may be reduced as 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.

#### DRESSING REMOVAL:

After removing secondary dressing:

- Gently lift away any non-gelled parts of the Sorbsan dressing.
- Irrigate the wound with sterile saline (0.9%) solution to remove Sorbsan gel left on the wound site.
- Use existing clinical protocols to clean the wound in order to remove any remaining exudate residue before wound assessment on the application of further dressings.

#### Storage

Store in a cool, dry place.

#### SYMBOLS USED ON LABELLING

