All you could wish for in a silicone wound contact layer

Comfort Performance Affordability
WHAT IS IT?
ADAPTIC TOUCH™ is a flexible, open-mesh primary wound contact layer comprised of cellulose acetate coated with a soft tack silicone designed to facilitate fluid transfer to secondary dressing and minimize adherence and pain at dressing change.

HOW IT WORKS

Comfort
ADAPTIC TOUCH™ helps protect the wound while minimizing patient pain and trauma on removal and at dressing change:

- The advanced mesh design allows for atraumatic removal.
- The soft tack silicone assists dressing application and helps prevent adherence of the secondary dressing to the wound.

In an in vitro model, the use of ADAPTIC TOUCH™ in conjunction with a secondary dressing reduced secondary dressing adherence (84% reduction with a foam dressing and 92% reduction with an alginate dressing).

ADAPTIC TOUCH™ with EB
According to a survey conducted by Debra USA on patients affected with EB, 93.5% of the patients would recommend ADAPTIC TOUCH™ to other patients and their families. ADAPTIC TOUCH™ helps protect the wound while minimizing patient pain and trauma on removal and at dressing change.
Performance

ADAPTIC TOUCH™ has been designed to incorporate:

- A large number of small sized pores, to minimize the risk of granulation tissue in-growth\textsuperscript{3,4}.
- While also maintaining an open area, which facilitates the free passage of exudate to the secondary dressing, reducing the risk of exudate pooling and maceration\textsuperscript{3,4}.

| Open area | 92\% greater than Mepitel\textsuperscript{3,4} |

Affordability

A consensus document described how well ADAPTIC TOUCH™ functions in the clinical settings over time. Particularly in regards to non-adherence to the wound and secondary dressing, atraumatic removal, ease of use and cost-effectiveness\textsuperscript{3}.

| ADAPTIC TOUCH™ is on average 15\% cheaper than Mepitel across the range of product sizes. Based on Global Healthcare Exchange (GHX) data Q2 2013 |

Skin tears case study

A case series involving 6 elderly patients with skin tears of type I, II and III showed ADAPTIC TOUCH™ to\textsuperscript{5}:

- increase patient comfort
- reduce pain
- decrease nursing time for dressing change.

WHEN TO USE

It is designed as a primary wound contact layer for use in the management of dry to heavily exuding, partial and full-thickness chronic wounds including:

- venous ulcers
- decubitus (pressure) ulcers
- diabetic ulcers
- traumatic wounds
- surgical wounds
- donor sites
- 1\textsuperscript{st} and 2\textsuperscript{nd} degree burns

Please refer to the full instructions for use in the packaging insert.

| ADAPTIC TOUCH™ may also be suitable for use, under medical supervision, with NPWT for the protection of fragile wound structures\textsuperscript{1,7} * |

| May be left in place for several days depending upon amount of exudate |

| ADAPTIC TOUCH™ stays in place during dressing application\textsuperscript{1,2}, without unravelling or shedding fibres |
Before application

Please refer to the full instructions for use in the packaging insert. Select a size of ADAPTIC TOUCH™ that is larger than the wound. Prepare the wound according to wound management protocol. Ensure skin surrounding the wound is dry. Remove ADAPTIC TOUCH™ from the pouch.

Dressing preparation

1. If needed, ADAPTIC TOUCH™ may be cut to size with sterile scissors.
2. It is best to cut ADAPTIC TOUCH™ while one or two backing papers are in place.

Dressing application

1. Remove one backing paper from ADAPTIC TOUCH™. Place ADAPTIC TOUCH™ directly over the wound and smooth in place around the wound.
2. Remove the second backing paper using surgical tongs or forceps. If more than one piece of ADAPTIC TOUCH™ is required, ensure dressings overlap to avoid secondary dressing adherence to the wound. Overlap should be minimized to prevent occlusion of holes.

Secondary dressing application

Cover ADAPTIC TOUCH™ with a secondary dressing such as TIELLE™.

Choose the secondary dressing based on the level of exudate. Apply any secondary cover or retention/compression bandage.

Dressing change and removal

Dressing change frequency is dictated by good wound care practice and will depend on the condition of the wound. ADAPTIC TOUCH™ may be left in place for several days.

1. Gently remove the secondary dressing.
2. Gently remove the dressing from the wound bed and discard.

ADAPTIC TOUCH™

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To learn more about the benefits of ADAPTIC TOUCH™, call 800-275-4524 or visit acelity.com

*Please refer to the full instructions for use in the NPWT devices packaging insert.
† Epidermolysis Bullosa (EB) is a group of genetic disorders that result in fragility of the skin. Blisters, open wounds and sores form as a result of the slightest touch, rub or trauma.

References:

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