

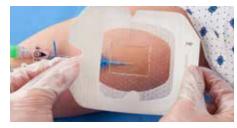
How to Use the 1658 Dressing on PICC Catheters



Application



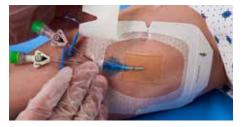
 Allow all antiseptics and skin protectants to dry completely.



Peel the liner from the dressing. Turn over so the adhesive faces the skin. Ensure that the CHG gel pad covers the catheter insertion site (and suture sites when possible).



Be careful not to stretch the dressing at placement. Apply firm pressure to the entire dressing starting over the gel pad to enhance adhesion.



4. Apply pressure to securement border with one hand, while removing paper frame with opposite hand.



 Remove notched tape strip from paper frame.
Orient the notch towards the dressing and apply the tape strip under the extension tubing and over the dressing border. Remove adhesive-free tabs.



 Document the dressing change information on the label strip. Apply label strip on top of dressing, over catheter lumen(s). Remove adhesive-free tabs.

Monitoring the Gel Pad



The dressing should be changed if the gel pad remains displaced when pressed with a finger. Change Tegaderm™ CHG Dressings every seven days, when the dressing becomes loose or soiled, if the gel pad is saturated, or in cases where there is swelling, visible drainage, or lost visibility.

Removal



 Using a low and slow removal technique, start removing the dressing from where the catheter or tubing exits the dressing toward the catheter insertion site. Avoid skin trauma by peeling the dressing back, rather than pulling it up from the skin.

When the CHG gel pad is exposed, grasp a corner of the gel pad and the transparent film dressing between thumb and finger.



 Apply sterile alcohol swabs or wipes, or sterile solutions (i.e., sterile water or normal saline) between gel pad and skin to facilitate removal of the gel pad dressing.



 If needed, a medical adhesive solvent can be used to help remove the dressing border. Continue the low and slow removal method until the dressing is completely removed.



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