

PRACTICAL GUIDE

Take control of healing close wounds sooner

From day one until complete healing^{1,2}



UrgoStart^{plus}
Treatment Range

For all patients with comorbidities
and at risk of delayed healing

*Excluding wounds with dark necrosis

URGO
MEDICAL
Healing people®

A simple, effective and reliable local treatment at all healing phases for patients with leg ulcers, diabetic foot ulcers and pressure injuries and long standing acute wounds.

Effective

Reduces healing time^{1,2} right from the start, with the interactive matrix

Simple

Use from day 1 to complete healing, at all healing phases*

Reliable

Recommended by local and international guidelines



Recommended by international guidelines



1. Edmonds M, Lázaro-Martínez JL, Alfayate-García JM, Martini J, Petit JM, Rayman G, Lobmann R, Uccioli L, Sauvadet A, Bohbot S, Kerihuel JC, Piaggese A. Sucrose octasulfate dressing versus control dressing in patients with neuroischaemic diabetic foot ulcers (Explorer): an international, multicentre, double-blind, randomised, controlled trial. *Lancet Diabetes Endocrinol.* 2018 Mar;6(3):186-196. 2. Münter KC, Meaume S, Augustin M, Senet P, Kerihuel J.C. The reality of routine practice: a pooled data analysis on chronic wounds treated with TLC-NOSF wound dressings. *J Wound Care.* 2017 Feb; 26 (Sup2): S4-S15. Erratum in: *J Wound Care.* 2017 Mar 2; 26(3): 153

Holistic protocol of care

For diabetic foot ulcers,
leg ulcers and pressure injuries

1

Perform Holistic assessment

Identify cause and aetiology of the wound

2

Treat Aetiology

Compression, off-loading, pressure relief



3

Treat locally with UrgoStart^{plus}

Treatment Range



From day 1

To complete healing



Select appropriate version & size depending on wound characteristics

4

In case of infection episode, treat as per your local infection management protocol. Reassess treatment after no more than 14 days. When infection is fought, move back to UrgoStart^{plus}

What format for what wound ?



For all low to highly exuding wounds

UrgoStart^{plus}



Sizes available
6 x 6 cm
10 x 10 cm
15 x 20 cm

UrgoStart^{plus}
Border



Sizes available
8 x 8 cm
10 x 10 cm
13 x 13 cm
15 x 20 cm



For hard to dress locations & for fragile peri-wound skin

UrgoStart^{plus}
Pad



Sizes available
6 x 6 cm
10 x 10 cm
15 x 20 cm

UrgoStart^{plus}
Contact



Sizes available
5 x 7 cm
10 x 10 cm
15 x 20 cm



For very highly exuding wounds

UrgoStart^{plus} + secondary absorbant dressing
Pad



Sizes available
6 x 6 cm
10 x 10 cm
15 x 20 cm

How to apply?



Remove one side of the protective film. Apply micro-adherent side of the dressing to the wound.



Remove the 2nd side of protective film and gently apply the rest of the dressing.



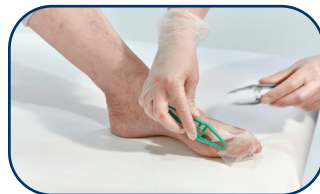
For UrgoStart[®] Plus: secure the dressing with conforming bandage.

Note

Ensure a certain level of humidity. If the wound is dry, use hydrogel.



Remove one side of the protective film, and grab the dressing with tweezers.



To apply it to the wound bed. Here is an example of cross-shape cut.



Adjust secondary dressing to fit the level of exudates of the wound.



UrgoStart[®] Plus Pad can be cut to fit the shape of the wound.



Remove protective film, and apply micro-adherent side of the dressing to the wound.



For very high levels of exudate, use a super-absorbent secondary dressing on top.

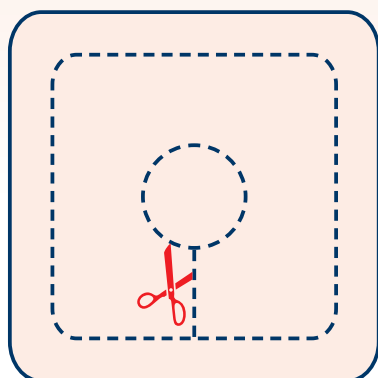


Secure dressing with a conforming bandage & adhesive tape.

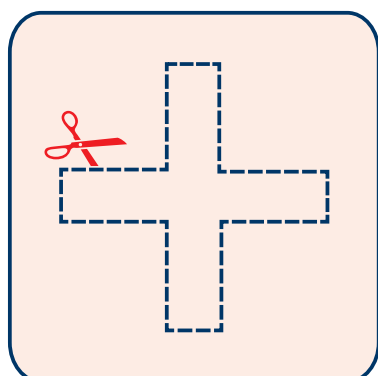
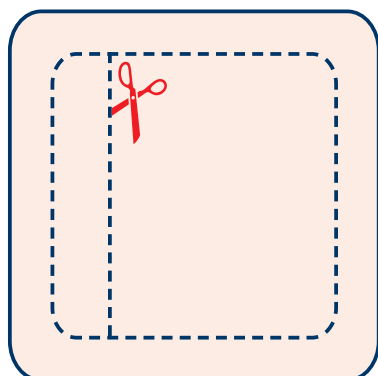
Note

Use barrier cream if the wound is very exudative to avoid maceration.

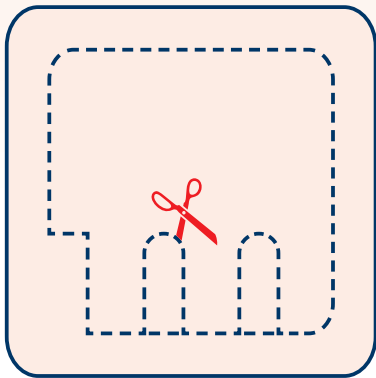
Fit to wound bed shape



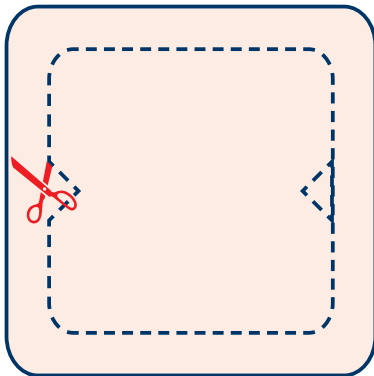
Toes



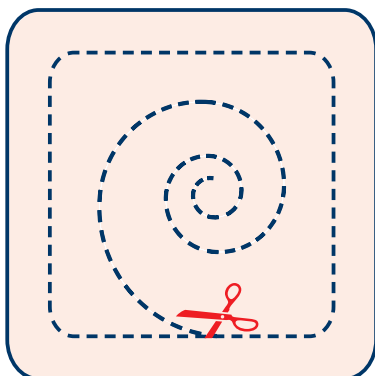
Inter-toes



Heels



Cavities





Urgo Medical Australia Pty Ltd

ABN 29 634 155 829

Level 2, 100 Cubitt Street,
Cremorne, Victoria 3121

Tel +61 (0) 39114 2222

urgomedical.com.au

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APR2023V1