

UrgoTul[®]

LIPIDO-COLLOID ULTRA FLEXIBLE CONTACT LAYER



CE 0459 

- Healing in a moist environment
- Painfree and atraumatic removal - does not dry out
- Proliferation of fibroblasts

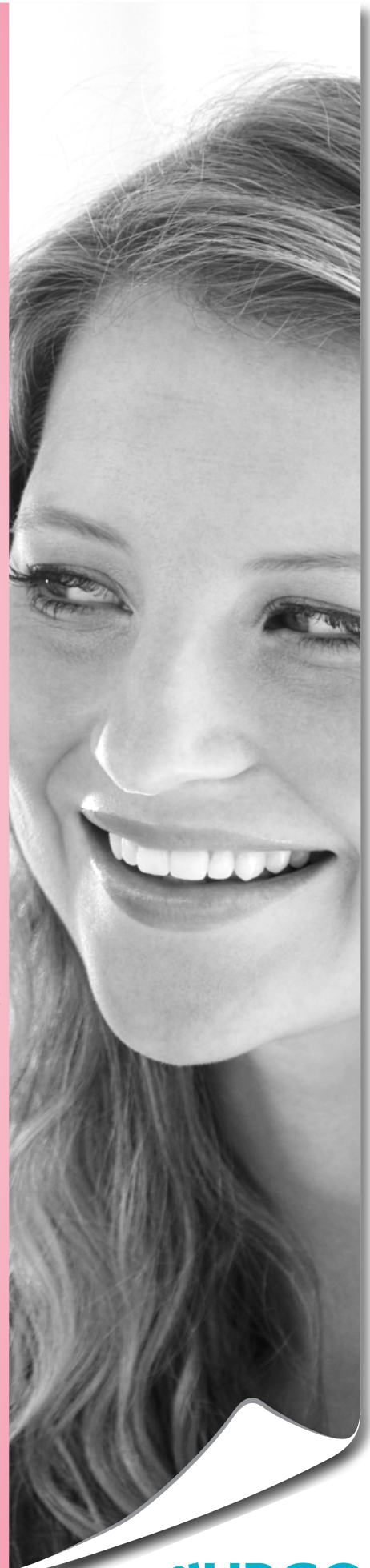
Indication:

Acute and chronic wounds, low to highly exuding, adapted to wounds located in awkward areas

UrgoTul[®]

Supplied in boxes of individually pouched and sterile dressings, ready to use

Sizes	Units per box
5 x 5 cm	10
10 x 10 cm	10
15 x 20 cm	10
10 x 40 cm	10





UrgoTul®



DESCRIPTION

■ Urgotul is a sterile, non-adhesive, non occlusive lipido-colloid contact layer (issued from the Technology Lipido-Colloid, exclusive patented innovation by Laboratoires Urgo)

COMPOSITION:

■ Urgotul is an ultra-flexible lipido-colloid dressing made of a polyester mesh impregnated with hydrocolloid (carboxymethylcellulose) and petroleum jelly particles

METHOD OF STERILIZATION: Sterilized by raditation.

PROPERTIES

- On contact with wound exudate, hydrocolloid particles in Urgotul mass interact with petroleum jelly component to form a lipido-colloid interface creating a moist environment favourable for the healing process.
- Fatty in its chemical composition, without being greasy to the touch, Urgotul does not adhere to the wound or to the surrounding skin.
- Removal of the dressing is totally pain-free and atraumatic for the wound.
- Urgotul promotes fast healing by stimulating fibroblasts proliferation.
- Flexible and conformable, Urgotul is especially suitable for wounds located in awkward areas

INDICATIONS

- Urgotul is indicated for the management of acute wounds (burns, skin tears, traumatic wounds, abrasions, post-operative wounds) and chronic wounds (leg ulcers, pressure ulcers and diabetic foot ulcers) at the granulation and epithelialisation stage.
- Urgotul is also intended for the management of epidermolysis bullosa.
- Ultra-flexible, Urgotul is particularly indicated to cover anfractuous or awkwardly placed wounds and to wick deep wounds.

DIRECTIONS FOR USE

METHOD OF USE

- Clean the wound as per local protocol.
- If an antiseptic is first used, carefully rinse the wound with normal sterile saline before applying UrgoTul.
- Dry the surrounding skin carefully.
- Remove the protective wings.
- Apply Urgotul to the wound.
- Urgotul can be cut with sterile equipment to fit the size of the wound.
- Cover Urgotul with a secondary dressing suitable to absorb wound exudate.
- Hold secondary dressing in place with a conforming bandage, an adhesive tape or an elasticated tubular bandage.
- Urgotul can be renewed every 2 to 4 days and left in place for up to 7 days depending on the wound condition.
- For patients with epidermolysis bullosa, Urgotul should be changed after 1 to 3 days.

PRECAUTIONS

- Urgotul may adhere to latex gloves. In that case, moistening the gloves with saline solution will facilitate handling of the dressing.
- If clinical signs of local infection appear, the treatment may be continued under medical supervision, it may be preferable to use a Silver dressing instead.
- In case of deep wounds, Urgotul does not need to be applied in several layers.
- In the event of deep, anfractuous wounds or fistulas, leave part of the Urgotul dressing visible and accessible outside the wound.
- Do not re-sterilise the dressing.
- Store Urgotul dressings flat, protected from moisture and heat (temperature below 25°C).