SMTL Dressings Datacard

Product Name:	**KALTOSTAT Fortex**
Classification Name:	**Dressing Calcium/Sodium Alginate**
Manufacturer:	**ConvaTec Ltd**

Description

[*** display ps-kaltostat-fort ***]

[*** linked kaltostat-fort-01 ***]Kaltostat Fortex consists of a highly absorbent fibrous fleece composed of the mixed calcium and sodium salts of alginic acid in the ratio of 80:20. The dressing is available as a flat non-woven pad for application to surface wounds. In the presence of exudate or other body fluids containing sodium ions, the fibres absorb liquid and swell and calcium ions present in the fibre are partially replaced by sodium, causing the dressing to take on a gel-like appearance. This overlays the wound and provides a micro-environment that is believed to facilitate wound healing. Due to the manufacturing process and thickness of the dressing, Kaltostat Fortex has a much higher fluid handling capacity than standard Kaltostat.

Indications

Kaltostat Fortex is specifically intended for the management of very heavily exuding wounds where daily dressing changes are required at least daily with Kaltostat.

Although there are no known contra-indications to the use of Kaltostat Fortex, the dressing will be of little value if applied to wounds that are dry, or lightly exuding or covered with hard black necrotic tissue.

Contra-Indications

Known sensitivity to Kaltostat or its components. Although there are no known contra-indications to the use of Kaltostat Fortex the dressing will be of little value if applied to wounds that are very dry, or covered with hard black necrotic tissue.

Method of use

Prior to application, Kaltostat Fortex sheet should be cut or folded to the shape of the wound, placed in position and covered with a second sterile dressing pad held in place with surgical tape or a bandage as appropriate. The dressing can be removed with forceps or the gloved fingers.

Frequency of Change

The interval between dressing changes will depend on the quantity of exudate present. In general, the dressing should be changed when the maximum absorbency of the alginate is reached or when strike-through of the secondary dressing occurs. Initially daily dressing changes may be required but as healing progresses, and exudate decreases, the interval between changes can be extended to two or three days. If less frequent changes are required, a change to Kaltostat or some other alternative treatment should be considered.

Warnings

Wounds that show signs of clinical infection may be dressed with Kaltostat Fortex, which should be changed daily; systemic antibiotic therapy should be initiated at the discretion of the medical officer in charge.

Presentation

Kaltostat Fortex is presented individually wrapped in a peel pouch, sterilised by gamma irradiation.

Sizes

10.0 cm × 10.0 cm

Revision Details

Revision Author	Dr S. Thomas
Revision No	1.3
Revision date	1997/12/16

Please inform SMTL of any inaccuracies or changes required in this datacard.

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