

Secure fit and gentle on skin¹⁻⁴



Transparent Silicone Adhesive Film Roll



Supporting healthcare professionals

Secure fit and gentle on skin1-4

OPSITE° Flexifix Gentle combines breathability, transparency and up to seven day wear time to offer a versatile silicone film roll for patients with sensitive fragile or at-risk skin¹⁻⁶. It removes cleanly, without disrupting fragile skin layers or causing patients undue pain^{2,5}.

Advantages



Suitable for patients with fragile skin^{1,3,4}

The gentle silicone adhesive minimises the risk of damage to the skin, whilst still providing secure adhesion of primary dressings.



Shower and bacteria proof film^{2, 7-11}

OPSITE Flexifix Gentle provides a bacterial barrier, protecting the site against extrinsic contamination while allowing the patient to shower with the dressing in-situ.



Easy to apply

Can be lifted and repositioned without losing adherent properties². Application system designed for ease of use and silicone allows repositioning once applied if required.



Minimises the risk of pain or discomfort on removal^{1,4} Increases patient concordance and comfort.



Ability to cut to required size⁶

Allows correct sized film to be used for the required site.



Moisture vapor transmission rate (MVTR)

OPSITE Flexifix Gentle is a moisture vapour permeable dressing5, allowing excess moisture to evaporate through the dressing preventing moisture pooling underneath the dressing5. Excessive moisture provides an ideal environment for local skin organisms to flourish¹².



OPSITE° FLEXIFIX Gentle Ordering information

Product code	Product description	Items per unit
66801195	2.5cm x 5m roll	Box/1
66801196	5cm x 5m roll	Box/1
66801197	10cm x 5m roll	Box/1

Always read the label. Use only as directed. If symptoms persist see your doctor/healthcare professional

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Smith & Nephew Ltd New Zealand T +64 9 820 2840 F +64 9 820 2841 www.smith-nephew.com/new-zealand **Customer Service** T 0800 657 799 (Surgical) T 0800 807 663 (Wound)



Indications

- Retention of primary dressings
- Flxation of tubing
- Protection of fragile skin
- Protection from external contamination







Supporting healthcare professionals for over 150 years

°Trademark of Smith & Nephew. SN14212 (11/18)

1. VT Study Data of File (on ALLEVYN° Gentle Border) HVT050 04/12/08. 2. Data on File Report Reference OR-DOF/017, An open, prospective, randomised, comparative study to compare the performance of ALLEVYN Gentle Border Multisite with an alternative silicone adhesive dressing, Palmer S and Mistry C; June 2011. 3. "Ageing changes in skin", update on 22/08/2006 by Sandra W. Cohen M.D. Ref http://www.nim.nih.gov/medlineplus/ency/article/004014.htm. 4. Hurd T. et al., A multicentre in-market evaluation of ALLEVYN Gentle Border. Wounds UK, 2009, 2009;5(3):32-44. 5. OPSITE Flexifix Gentle Physical Testing Data on File report DS14/004/R January 2014, Daubney, L. (*in-vitro*) 6.Cole, E. 2012. Usability study of Flexifix Gentle in comparison to Flexifix. Smith & Nephew. Hull. report W11429/R9. 7. Smith & Nephew Wound Management, Data on File Report Reference OR DOF/011, Results from a Multi-centre, Noncomparative Clinical In Market Evaluation of ALLEVYN Gentle Border dressing (CIME/008) and from open, prospective, randomised, within volunteer VTR/HVT 050) comparison of Dakota and Mepilex Border in terms of showerproof and use on awkward areas. Hussein D; August 2010. 8. Rubio, P A . Use of semi-occlusive, transparent film dressing for surgical wound protection: experience in 3,637 cases. *Int. Surg.* 1991;76:253-254 9. Internal data on file. Reference HVT031 – A double blind, randomised, prospective, within volunteer comparison of Flexifix with EBO additive and corona treatment, Flexifix with EBO additive without corona treatment and the standard Flexifix product. 10. DS/09/062/R1, OPSITE Flexifix Bacterial Barrier dated June 2009. (*in-vitro*). 11. DS/12/199/R, Project Lascaux Comparative Waterproof Testing dated July 2012. (*in-vitro*). 12. Frasca D, Dahyot-Fizelier C, Mimoz O Prevention of central venous catheter-related infection in the intensive care unit. *Crit Care* 2010 14(2): 212. doi: 10.1186/cc8853