How to apply Flaminal in 4 easy steps

1. **ASSESS**
   - Assess the wound against the T.I.M.E. framework (see page 2) and select the right Flaminal product to use on the wound:
     - **Select Flaminal Hydro for wounds that have mild to moderate amounts of exudate.**
     - **Select Flaminal Forte for wounds that have moderate to heavy amounts of exudate.**

2. **APPLY**
   - **Clean and rinse the wound according to your local guidelines.**
   - **Apply a thin layer (1mm) of either Flaminal Hydro or Flaminal Forte to the wound.**

3. **DRESS**
   - **Assess the amount of exudate and select the appropriate dressing.**
   - **Choose an absorbent dressing for wetter wounds (e.g. KeraMax Care®).**
   - **On drier wounds, use a dressing that reduces evaporation to prevent the wound from drying out.**

4. **CHANGE**
   - **The dressing can stay in place for as long as the gel structure is intact: 1–4 days, depending on the amount of exudate.**
   - **It is important to assess the wound at regular intervals.**

**TOP TIPS**

- When using Flaminal Hydro, if the gel becomes too liquid too quickly, the wound is too wet — switch to Flaminal Forte instead.
- When using Flaminal Forte, if dry flakes of alginate appear in the wound, the wound is too dry — switch to Flaminal Hydro.
- During Flaminal treatment, dry within-tissue alginate flakes may appear on the wound edges. They should not be removed. The flakes will protect the wound edges and prevent maceration, which can slow the healing process.
- When using Flaminal Forte for highly exuding wounds (e.g. leg ulcers), apply the gel to the secondary dressing for ease of application.

---

**Order Information**

Flaminal is available on prescription in 4 convenient sizes and can be ordered through your pharmacy, or contact Script-easy on Freephone 0800 0121 699 or Fax 01903 875 085.

**For more specific product information and advice, or to place an order, talk to your local Territory Business Manager or call 01565 654 920.**

**References**


Moisture Balance — The different stages of wound healing

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shock</td>
<td>Wound shock is the initial stage, characterized by a lack of blood flow and tissue injury.</td>
</tr>
<tr>
<td>Debride</td>
<td>During the debridement phase, necrotic tissue and debris are removed to allow the wound to heal.</td>
</tr>
<tr>
<td>Dry</td>
<td>In the dry phase, the wound is protected and hydrated to promote healing.</td>
</tr>
<tr>
<td>Moist</td>
<td>Moist wounds require special attention to maintain a moist environment.</td>
</tr>
</tbody>
</table>

Cost-effective
Flaminal is self-sterilising. So, once opened, it can be recapped and reused on the same patient until the expiry date on the pack.

How Flaminal works

- **T** = Tissue management
  - Removal of necrotic tissue
  - Continuous wound debridement
  - Eliminates necrotic, dead tissue — helping to prepare the wound bed

- **I** = Inflammation and infection control
  - Keeping inflammation and infection under control
  - Antimicrobial: glucose oxidase and lactoperoxidase combine to restore and maintain the bacterial balance

- **M** = Moisture balance
  - Wound moisture management
  - Provides a moist wound environment
  - Absorb excessive exudate
  - Intimate contact with the wound surface

- **E** = Edge/epithelial advancement
  - Wound edge protection
  - Protects the wound edges
  - Not cytotoxic — not toxic to healthy skin cells

A total approach for Chronic Wounds

It is known that the chronic wound healing differs from that seen in acute wounds in that the normal process is disrupted or ‘in stasis’. In order for the normal healing to resume, the barriers to healing must be removed. Eschar and slough, while providing a focus for infection, can also delay healing. Removal of these, along with proper wound bed preparation, will aid the healing process.

Flaminal’s action on either dry or wet wounds enables these products to be used across a wide variety of challenging indications that require debridement, maintenance of optimum moisture balance and controlling bioburden, in order to prevent or reduce topical infection.

- Leg ulcers
- Pressure ulcers
- Diabetic foot ulcers
- Fungating wounds
- Radiotherapy wounds
- Skin tears
- Donor sites