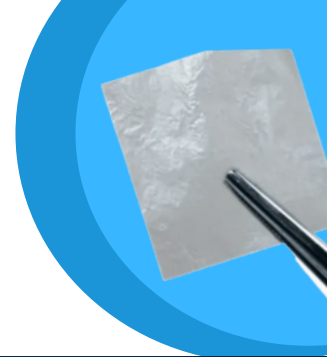












APPLICATION OF AMNIOTIC SKIN MEMBRANE



A STEP BY STEP GUIDE FROM THE INDUSTRY LEADERS IN WOUND CARE

WITH PROPER DEBRIDEMENT AND APPLICATION, THE AMNIOTIC MEMBRANE SERVES AS A POWERFUL TOOL FOR WOUND HEALING, ACTING AS A BIOLOGICAL SCAFFOLD THAT SUPPORTS CELL GROWTH AND PROTECTS THE WOUND FROM INFECTION. BY FOLLOWING THESE STEPS, YOU CAN OPTIMIZE WOUND CARE AND ENHANCE HEALING OUTCOMES FOR YOUR PATIENTS.

-  **STEP 1: WOUND ASSESSMENT**
Before applying the amniotic membrane, a thorough wound assessment is critical. Look for necrotic tissue, slough, or biofilm that could inhibit healing. For optimal results, it is important that the wound bed is clean and ready for the graft application.
-  **STEP 2: WOUND DEBRIDEMENT**
If the wound contains dead or non-viable tissue, debridement is essential. Using sterile instruments like a scalpel, curette, or forceps, carefully remove any necrotic tissue, slough, or eschar. This step promotes a clean wound bed, allowing better adherence of the graft and faster healing. There are different types of debridement, including sharp, enzymatic, and autolytic. Sharp debridement is the quickest method. Be thorough but gentle, ensuring all non-viable tissue is removed while preserving healthy tissue.
-  **STEP 3: IRRIGATE THE WOUND**
Irrigate the wound thoroughly using sterile saline. This step cleanses the wound and provides a moist environment, which is crucial for the successful adherence of the amniotic membrane.
-  **STEP 4: MAINTAIN A STERILE FIELD**
After debridement, continue to maintain sterility. Put on a fresh pair of sterile gloves and prepare the wound care materials. You will need sterile saline, non-adherent dressings, sterile scissors or a scalpel, and the amniotic membrane.
-  **STEP 5: PREPARE THE AMNIOTIC MEMBRANE**
Carefully open the amniotic membrane package in a sterile field. Use sterile forceps to handle the membrane, ensuring you do not touch it directly. If needed, trim the membrane using sterile scissors to match the exact size of the wound. Full coverage of the wound bed and surrounding skin is necessary to promote healing.
-  **STEP 6: APPLY THE MEMBRANE**
Place the amniotic membrane directly onto the wound bed (stromal side down if DFU states it). Ensure the membrane covers the entire wound, extending slightly beyond the wound edges. This promotes cell migration and encourages healing from the outer edges toward the center.
-  **STEP 7: ENSURE FULL CONTACT WITH THE WOUND BED**
Gently smooth out the membrane with sterile gauze to eliminate any air pockets or folds. Ensuring the membrane is in full contact with the wound bed is critical for its effectiveness in promoting cellular repair.
-  **STEP 8: APPLY A SECONDARY DRESSING**
Cover the membrane with a secondary dressing to protect it and maintain the moist wound environment necessary for healing. Foam, silicone-based, or hydrocolloid dressings work well for this purpose. Make sure the dressing allows for moisture retention without adding too much pressure.
-  **STEP 9: SECURE THE DRESSING**
Secure the dressing using medical tape or a light compression bandage. Ensure that the dressing remains securely in place, but not so tight that it restricts circulation or movement.
-  **STEP 10: POST-APPLICATION CARE AND PATIENT INSTRUCTIONS**
After the procedure, provide the patient with clear instructions for home care. Advise them to keep the dressing dry and undisturbed. Schedule follow-up appointments to monitor healing closely.