













Skin and Wound Product Information Sheet

Tubigrip (Lower Leg Application)			
Classification	Compression Therapy: Tubular Cit	rcumferential Compression	
Key Points	For Compression Therapy in general	<u> </u>	
	• A physician/NP order or clinical directio	n from a Wound Clinician is required to apply a	
	compression stocking		
	Only health care professionals who have	e successfully completed additional education for	
	compression therapy may apply compre	ession wraps	
	• Follow agency/Health Authority compre	• Follow agency/Health Authority compression therapy policies/practice standard	
	• Refer to the <u>Guideline: Application of Compression Therapy</u> for further information related to		
	indications, precautions and contraindic	cations	
	For this product specifically		
	• Latex based multi-purpose tubular stocking providing 10-15mmHg of compression when doubled		
	· · · · · · · · · · · · · · · · · · ·	Use a double layer of stocking unless directed differently by Wound Clinician/Physician/NP	
	Single patient use only; product can be reused/washed until stocking elasticity is lost		
	Prior to the first application, a complete Lower Limb Assessment (Basic & Advanced) is to be		
	done but an ABI may not be required.		
Indications	May be used for support of sprains, strains, soft tissue injury, post- burn scarring (specific		
	instruction for these uses are not included in this guide)		
	• For clients who require mild compression therapy for the treatment of		
	Venous insufficiency with or without ulcer(s) or		
	Arterial/venous insufficiency with or without ulcer(s) or		
	Lymphedema with or without ulcers(s) or		
	Generalized edema		
Precautions Contraindications	Product contains latex	and the second second	
	 Very thin legs and boney prominences are susceptible to excessive pressure and tissue damage Do not leave stocking pulled down or slouched around ankles as it may cause a tourniquet effect 		
	 Do not use for clients with allergies to la Do not use in the presence of uncontrol 		
	· ·	trolled lower limb skin or wound infection	
Farmata Q Cinca	Stocking size Calf size	trolled lower liftib skill of would illiection	
Formats & Sizes	Size B 12.5 – 15.0cm		
	Size C 15.0 – 24.5cm	⊘ Tubigrip [∞]	
	Size D 24.5 – 35.5cm	ELASTICATES TIMBULAR BANCHARE NATURAL COLUMN TON	
	Size E 35.5 – 45.0cm		
	Size F 45.0 – 50.5cm		
	Size G 50.5 – 60.7cm	What (V) All Than	
	Size J 60.7 – 73.0cm		
	5.200		
	Application Directions	Rationale	
Prior to the client mobilizing and with the client supine,		This gives a base-line measurement of the edema, as	
measure the widest part of the calf. Select the size of bandage		well as what size of tubular support bandage to use.	
based on the calf me	asurement and as per manufacturer's	100 TOWN	
recommendation.			
To determine the lon	igth of stocking needed:		
	om the base of the toes to 1-2 cm below the	***	
	ing the contours of the leg	WA	
	measurement (as per order/direction)	W.	
	for the everlap	Village	

add 2-3cm for the overlap

















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Apply/re-apply stocking in the early morning, if possible.	Edema should be minimal in the morning		
Wash or shower leg(s) with warm water. Moisturize intact skin	To remove dead skin and resolve/prevent dry skin		
with agency approved moisturizer. Allow moisturizer to absorb and dry before wrapping.	This measurement gives a base-line assessment/re-assessment of the client's edema.		
Measure the ankle circumference 10 cm from the bottom of the heel; measure the calf circumference 30 cm from the bottom of the heel.			
Apply an appropriate cover dressing if wound present.			
To Apply			
Apply the stocking starting from the base of the toes and pull up towards the knee; stopping ~ 4cm below the knee.	Compression begins from the toes, through the calf to below the knees.		
	Doubling the stocking will provide 10-15 mmHg of pressure.		
	Finishing the bandage 2-3 cm below the knee will prevent a tourniquet effect from occurring.		
Double the stocking back over limb ensuring that the toes exposed and that the second layer of stocking is taken 2-3cm higher up the limb than the first layer.			
Ensure the top layer is at least two finger widths below the back			
of the knee. Smooth stocking to ensure no wrinkles of creases			
are present.			
To Remove			
The stocking should be removed at night when the client is	Stocking left pulled down or slouched around ankles		
supine. Remove the stocking by pulling over the foot like a pair	may cause a tourniquet effect.		
of socks. Do not leave stocking pulled down or slouched around			
ankles.			
Frequency of Dressing Change Change the stocking if it is soiled, lost its shape or is slipping.	Page case the wound's cover drassing if wound available		
Change the stocking init is solled, lost its shape or is slipping.	Reassess the wound's cover dressing if wound exudates seeps through to stocking.		
Reduction of edema will result in the stocking slipping. Re-	seeps till ough to stocking.		
measure the calf and select another size of stocking.			
The stocking should be hand washed daily in cold water and	Washing will help to reset the elasticity of the stocking.		
hung to dry. Client will need two sets of stockings to allow the	g stocking.		
alternate stocking to dry after washing.			
The stocking will need to be replaced once it has lost its			
elasticity (4-6months).			
Expected Outcome			
Measurable improvement in the ankle and calf measurements within 1 week.			
For further information, please contact your Wound Clinician.			
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