

## Lymphlex® Short Stretch Compression Bandage

Lymphlex Short Stretch (Inelastic) Compression Bandages are designed to provide a sub-bandage pressure of 30-40mmHg when applied at full stretch, with 50% - 70% overlap.

### INDICATIONS

- Compression therapy for the treatment of Venous Leg Ulcers, where a pressure of 30-40mmHg, at the ankle, at rest, is appropriate - where an ABPI of 0.8 or greater exists
- Management of chronic oedema, phlebological conditions, lymphoedema management and soft tissue injury support.

### CONTRAINDICATIONS

- Advanced peripheral neuropathy
- Decompensated cardiac insufficiency
- Septic phlebitis
- Phlegmasia cerulea dolens
- ABPI <0.8
- Perception disorders of the skin
- Hypersensitivity or allergy to any of the bandaging materials

## INSTRUCTIONS FOR USE



Reduces  
Oedema



Easy  
Application



Can be Washed  
and Reused

### GENERAL INFORMATION

- Prior to application of bandages, wounds should be cleansed, and covered with a wound dressing appropriate to the stage and phase of healing.
- Padding (Lymphlex® Air) should always be used underneath Lymphlex Short Stretch Compression Bandages.
- If an ankle circumference of less than 18cm is identified, padding material should be used to increase the circumference to greater than 18cm before compression bandaging is applied.
- Correct application technique training is recommended for this system. The bandaging technique should be determined by the clinician-in-charge.
- In order to obtain the outlined compression value, Lymphlex should be applied at full stretch (maximum extension).
- The foot should be positioned as close to a right angle (90°) to the leg as possible, to maintain maximum ankle joint movement.
- The bandage should be applied to the lower leg in a manner that creates graduated compression from the foot (highest pressure) to the knee (lowest pressure).
- The rolled-up part of the bandage should face outwards, and be kept close to the leg, during application.

### PRECAUTIONARY MEASURES

- Untrained application may cause skin necroses and nerve injuries from pressure.
- Slight livid discoloration of the toes is normal. This must disappear when the patient starts walking or moving the foot (flexion and extension).
- If the symptoms (pain or discoloration) do not cease, the bandage must be removed and applied again with less compression (stretch). Should pain increase significantly, while the bandage is being worn, a physician must be consulted.

### INFORMATION FOR PATIENTS

The Lymphlex Short Stretch Compression Bandage that has been applied is to provide lower leg compression therapy. Compression therapy is one component of the treatment of Venous Leg Ulcers.

- Movement, particularly walking, is very good for you when compression bandage have been applied, and helps increase the effectiveness of the bandages. If walking is limited, you can obtain similar benefits from flexing your ankles and wriggling your toes, regularly, throughout the day.
- If sitting for long periods, it helps to elevate your legs, to assist in swelling reduction.
- The bandage may feel looser after a few days of starting therapy. This means the swelling that is being treated is going down – it's working!
- Make sure you keep your bandages dry – ask your clinician about devices for use when showering/bathing.

#### ATTENTION

If you have:

- Loss of sensation in any part of the bandaged foot or leg, or pale, white or dusky toes, that do not return to normal colour after a short walk or simple ankle movements, or
- a sensation of pinched skin, or
- pain in the bandaged leg that suddenly increases, remove the bandage, and contact the clinician who applied them, as soon as possible.

### OPTIONS

REORDER	SIZE	PCS/UNIT
LOR003	8cm x 5m	1
LOR004	10cm x 5m	1
LOR005	12cm x 5m	1

#### RECOMMEND

UP TO  
**7**  
DAYS

Lymphlex® Short Stretch (Inelastic) Compression Bandage is an individually replenishable component of the Lymphlex® Reduce Compression Therapy Kit.



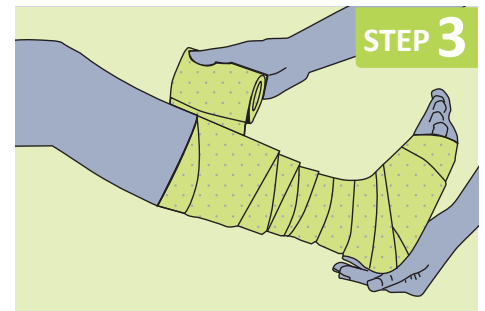
STEP 1

Cover any wounds with dressings of choice, to support the stage and phase of healing.



STEP 2

To determine the size and number of Lymphlex® Short Stretch Compression Bandages, measure the circumference of the ankle. If it is greater than 26cm, two bandages are recommended. If less than 18cm, pad the area to obtain an 18cm or greater measurement.



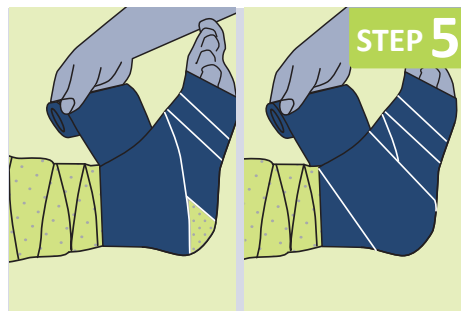
STEP 3

Ensure to apply protection layer Lymphlex® AIR Padding Bandage applying from the foot at the base of the toes.



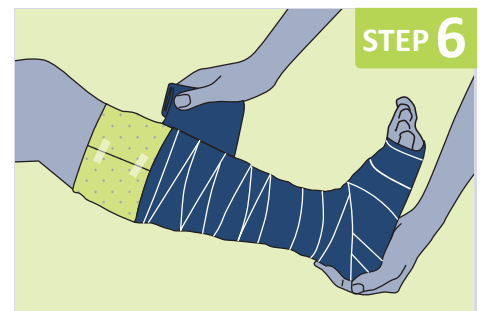
STEP 4

Anchor the Lymphlex® Compression Bandage at the base of the toes with 1 rotation with no stretch. Commence applying bandage with full stretch and layers overlapping by 50% - 70% until you reach the lower ankle.



STEP 5

Complete a turn behind the ankle to cover the Achilles tendon. Then complete a heel enclosing turn ending the rotation at the front of the ankle. Continue spiral application at full stretch up towards the knee overlapping by 50 - 70%.



STEP 6

If using 2 bandages, end the first bandage when you reach the base/curve of the calf. Secure the end of the bandage in place with 2 strips of Lymfix® Fixation Tape.

Cover the end of the first Lymphlex® bandage and continue the application of the second Lymphlex compression bandage in spiral/figure of eight turns from base of the calf to the knee with 50 - 70% overlap with each turn, finishing 2cm below the popliteal crease. Hold the Lymphlex bandage in place with 2 strips of Lymfix® Fixation Tape.

## BANDAGE CHANGE

The clinician-in-charge is responsible for determining the need for dressing changes.

Re-application is guided by stage and phase of oedema/wound.

Bandages may remain in situ for up to 7 days.