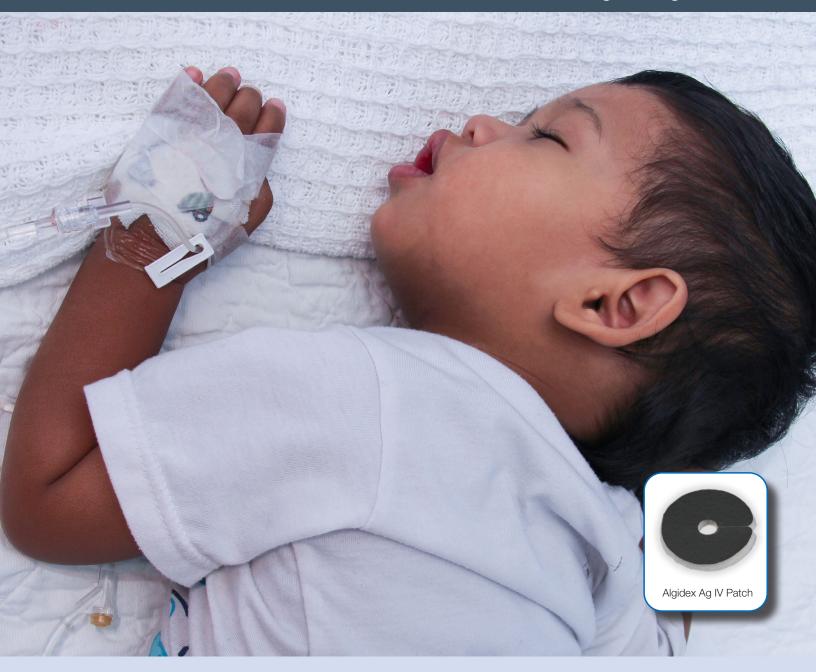
# Algidex Ag® IV Patch



Algidex Ag® is an effective bacterial barrier to help prevent catheter related infections. It is an ideal dressing for intravenous catheters, tube sites, or external fixator pin sites. It has a unique combination of silver alginate and maltodextrin that provides an immediate and sustained antimicrobial barrier against a broad spectrum of wound pathogens for up to seven days.



# **ALGIDEX AG® I.V. PATCH**

silver alginate catheter dressing

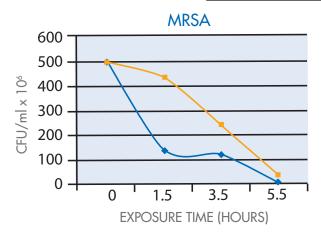
### antimicrobial analysis:

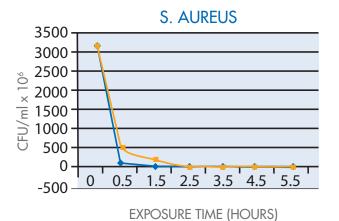
Algidex Ag® is a technologically advanced wound dressing that has been uniquely formulated with a combination of ionic silver alginate and maltodextrin to provide immediate and sustained antimicrobial barrier against a broad spectrum of pathogens. The antimicrobial barrier remains effective for up to seven days. The unique formulation will not adhere to the site upon removal.

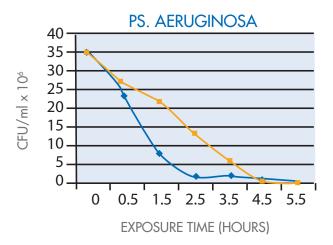


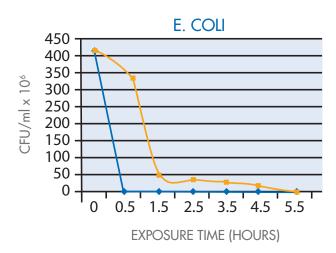
# **SURVIVAL CURVES\***











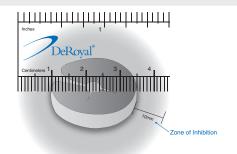


scan here for study information about  $\mbox{Algidex AG}^{\mbox{\scriptsize 8}} \mbox{ I.V. Patch}$ 

# ALGIDEX AG® I.V. PATCH (continued) METHODS

An in-vitro laboratory study using the Kirby-Bauer Susceptibility Test to determine antimicrobial properties by measuring the zone of inhibition.

ALGIDEX AG® I.V. PATCH RESULTS:*						
	Staphylococcus aureus	Staphylococcus aureus	Pseudomonas aeruginosa			
Time Interval	ATCC #6538	ATCC #33591	ATCC #9027			
24 hours	6 mm	6 mm	5 mm			
48 hours	5 mm	5 mm	7 mm			
72 hours	6 mm	5 mm	12 mm			
96 hours	5 mm	5 mm	10 mm			



## use of the patch during imaging procedures\*

Procedure Type	Target	Image Distortion	Magnet Pull	Condition of Patch after Test	Patch Placement
MR 1.5 Tesla	Knee	No	No	No change. No heat caused by patch. No distortion of images.	Medial aspect of right knee
CT Duo Motion 2 Detectors	Abdomen Chest	No	No	No Change No distortion of images.	Anterior Abdomen
General Radiology Digital Chest Unit	Chest	No	N/A	No Change. No distortion of images.	Upper anterior chest (center marked w/Radiologic x-spot)
General Radiology Digital Multipurpose R&F	Abdomen Pelvis	No	N/A	No Change. No distortion of images.	Upper abdomen and LRQ of pelvis (center marked w/Radiologic x-spot)

#### features & benefits

- lonic silver contacts wound pathogens associated with catheter related infections
- Absorbs moisture around the catheter insertion site
- Sterile patch of polyurethane foam coated with a silver alginate and maltodextrin matrix
- Antimicrobial barrier against a broad spectrum of wound pathogens for up to seven days including methicillin-resistant Staphylococcus aureus (MRSA), Staphylococcus aureus, Pseudomonas aeruginosa and E. Coli\*

#### indications

- Dialysis catheters
- Central venous lines
- Arterial catheters
- External fixator pins
- Epidural catheters
- Peripheral I.V. catheters
- Gastrostomy feeding tubes
- Non-vascular percutaneous devices
- 1st and 2nd degree burns
- Donor sites
- To protect vascular access sites, intramuscular sites, and surgical incisions

#### contraindications

- Third degree burns
- Ulcers resulting from infections
- Lesions in patients with active vasculitis
- Patients with sensitivity to silver, silver compounds, or alginates

#### patch sizes



Product #	Pad	Qty/Bx	Qty/Cs
46-IV20	3/4" disc w/2 mm opening	5	50
46-IV22	1" disc w/4 mm opening	5	50
46-IV25	1" disc w/7 mm opening	5	50
46-IV32	1" disc w/4 mm opening	5	50
	(with insert)		
46-IV34	¾" disc w/o opening	5	50
46-IV375	1½" disc w/7 mm opening	5	50

## application & removal

#### **APPLICATION:**

- 1. May be applied immediately following initial catheter placement or during routine catheter dressing change.
- 2. Apply Algidex Ag® I.V. Patch with dark side touching the catheter and skin.
- 3. Secure patch in place with retention dressing such as gauze, transparent film or tape.
- 4. Patch may be worn up to seven days.









#### **REMOVAL:**

- 1. Remove retention dressing, if applicable.
- 2. Lift Algidex Ag® I.V. Patch from the catheter and gently wipe away any residue during routine dressing change using saline or antiseptic skin prep as stated in the institutional procedural guidelines.
- 3. Discard according to institutional policy.

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\*All data on file.

