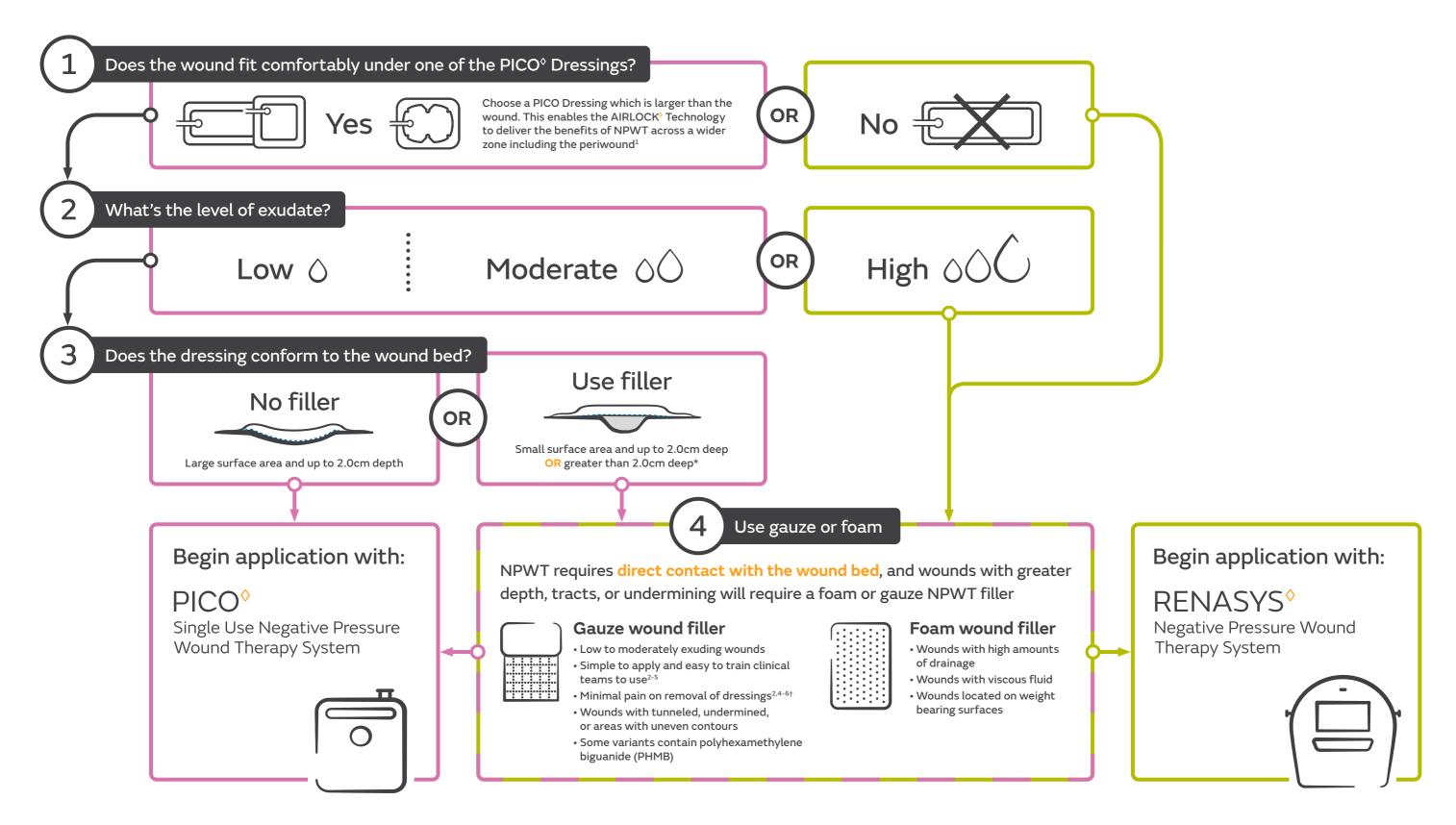
♣ OneNPWT clinical decision tree for open wounds



Smith+Nephew does not provide medical advice. The information presented is not, and is not intended to serve as, medical advice. It is the responsibility of healthcare professionals to determine and utilize the appropriate products and techniques according to their own clinical judgment for each of their patients. The information presented may not be appropriate for all jurisdictions. For detailed product information, including indications, precautions and warnings, please consult the product's applicable Instructions for Use (IFU) prior to use.

*Wounds must not contain exposed arteries, veins, nerves or organs. †p=0.046; n=31; Compared to black foam in acute post traumatic wounds. **Reference: 1.** Brownhill R. PICO^o Biomechanical Study. Data on file report. August 2019. DS/19/211/R. **2.** Hurd T, Chadwick P, Cote J, Cockwill J, Mole T, Smith J. Impact of gauze-based NPWT on the patient and nursing experience in the treatment of challenging wounds. International Wound Journal. 2010;7(6):448-455. **3.** Fraccalvieri M, Scalise A, Ruka E, et al. Negative pressure wound therapy using gauze and foam: Histological, immunohistochemical, and ultrasonography morphological analysis of granulation and scar tissues – Second phase of a clinical study. In. European Journal of Plastic Surgery. Vol 37 2014:411-416. **4.** Johnson S. V1STA® – A new option in Negative Pressure Therapy. Journal of Wound Technology. 2008;1:30-31. **5.** Fraccalvieri M, Ruka E, Bocchiotti M, Zingarelli E, Bruschi S. Patient's pain feedback using negative pressure wound therapy with foam and gauze. International wound journal. 2011;8(5):492-499. **6.** Smith+Nephew 2009. A prospective, open labelled evaluation of the use of EZCare in the management of chronic and acute wounds. Internal Report. SR/CIME/010/012. OTrademarks of Smith+Nephew. All Trademarks acknowledged. ©November 2020 Smith+Nephew. AWM-AWD-28344 | GMC1146d | RoW