



A Cost Comparison of a Silver, Pain-free Donor Site Dressing vs a Traditional Donor Site Dressing

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Purpose:

This study examined the cost-effectiveness of a newer, non-adhering silver dressing¹ for donor sites compared to a traditional donor site dressing. The analysis examined the healing time, the cost of one-on-one nursing time, and the pain involved with dressing changes.

Introduction:

Donor site care following split-thickness skin grafts varies greatly, often being dependent on physician education and preference of products. As newer, better, and more cost-effective dressings become available, protocols should be re-examined for the best possible

options. One method to dress donor sites includes the application of a petrolatum-based dressing to the site, followed by nursing using a hair dryer on the site 10-15 minutes each hour to keep the wound dry, for 3 to 4 days. Although the dressing application itself is simple, this method is time-consuming for nursing and is often painful for patients. Additionally, healing time can be prolonged by several weeks. Another option is to use a non-adhering silver dressing that is changed at 24 hours post-op, then again at 5 or 6 days post-op. This dressing is also simple to apply, but uses significantly less staff time, and is more cost-effective.

* Product used was Restore Contact Layer Dressing with Silver and TRIACT Technology by Hollister Wound Care LLC.

Methodology:

- A non-adhesive, non-adherent silver contact layer¹ was placed against a donor site in the operating room following a split-thickness skin graft
- The contact layer was covered with a hydrofiber, followed by a thin film
- The dressing was removed at 24 hours post-op
- The wound was cleaned and a new dressing of a silver, non-adhesive, non-adherent, absorbent foam,² secured by 6 inch tape, was placed
- The dressing was changed again at either post-op day 5 or 6
- The patient was instructed to remove the dressing in 5 days and replace it with the foam if healing had not occurred

Figure 1 Donor site in the operating room following a split-thickness skin graft.

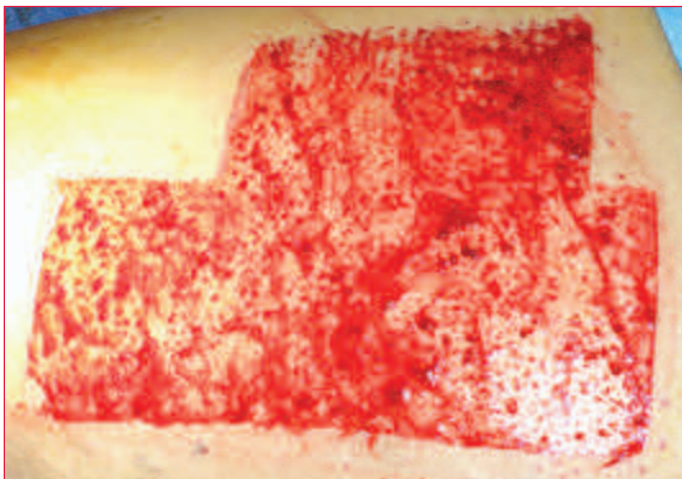


Figure 2 Donor site with application of a non-adhesive, non-adherent silver contact layer.¹

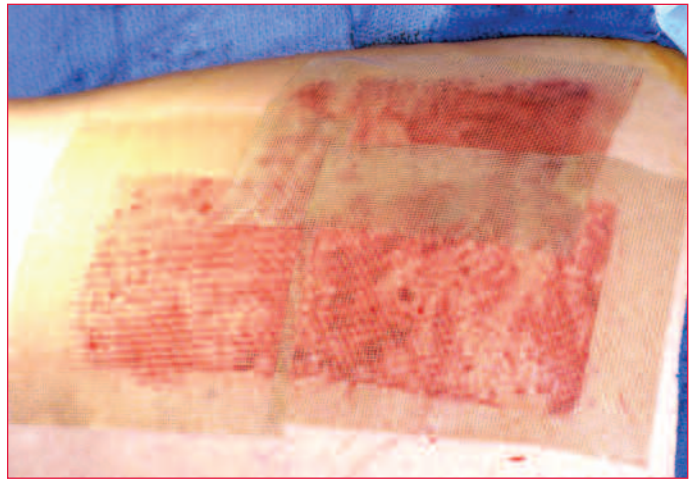


Figure 3 The contact layer¹ covered with a hydrofiber.

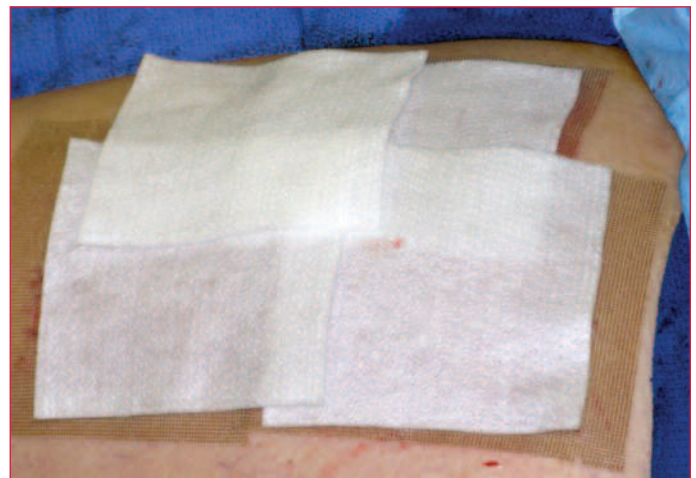
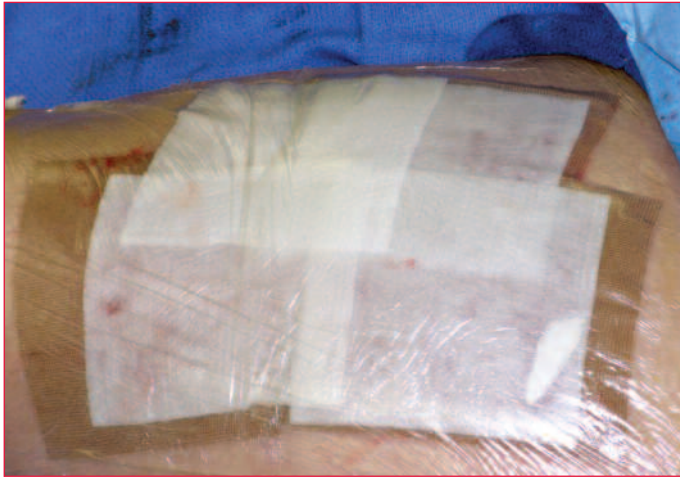


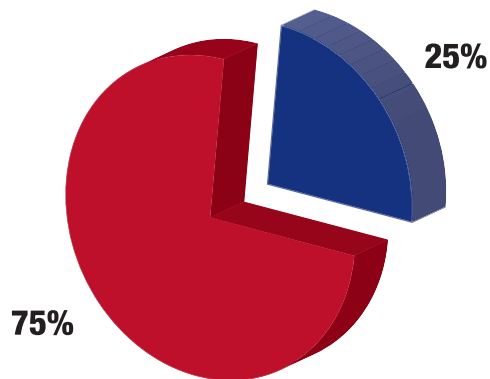
Figure 4 The contact layer¹ covered with a hydrofiber, followed by a thin film.



Results:

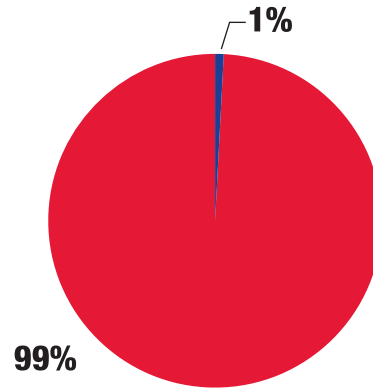
- Patients reported minimal to no pain associated with the dressing changes, and the donor sites had completely re-epithelialized by post-op day 9 or 10.
- The time spent by staff was dramatically reduced while the patient was in the hospital, from 1440 minutes (24 hours) to 30 minutes (0.5 hours) (time spent on direct patient care related to the donor site).

Figure 5 Nursing time allotment for four day hospital stay for old donor site dressing.



■ Old Donor Site Dressing Time – 1440 minutes
 ■ Remaining Time for Patient Care – 4320 minutes

Figure 6 Nursing time allotment for four day hospital stay for new donor site dressing.



■ New Donor Site Dressing Time – 30 minutes
 ■ Remaining Time for Patient Care – 5730 minutes

- The essential time reduction of nursing care was 98%, or a cost savings in nursing care time of \$658.70 per patient.

Conclusion:

- The clinical trial of a new silver, non-adhesive, non-adherent dressing for donor sites for our hospital not only healed the wounds more quickly than the traditional method, but also provided a substantial cost savings in nursing time.
- Additionally, patients experienced a pain-free dressing change, which enhanced patient satisfaction.

(1) Restore Contact Layer Dressing, Silver, with TRIACT Technology by Hollister Wound Care LLC.

(2) Restore Non-Adhesive Foam Dressing, Silver with TRIACT Technology by Hollister Wound Care LLC.

As Presented at
**Clinical Symposium on Advances
in Skin & Wound Care**

October 26–30, 2008
Las Vegas, NV

FINANCIAL ASSISTANCE/DISCLOSURE

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910472-1008



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