



Rosidal® sys

Ulcus cruris Kompressionsystem

Système de compression pour ulcère de la jambe

Leg ulcer compression system

Sistema de compresión para úlceras de la pierna

Sistema compressivo per l'ulcera vascolare

Compressiesysteem voor ulcus cruris

Kompressiesysteem til ulcus cruris

Kompressionssystem for bensår

Kompresní systém pro léčbu ulcus cruris

Kompresný systém na terapiu ulcus cruris

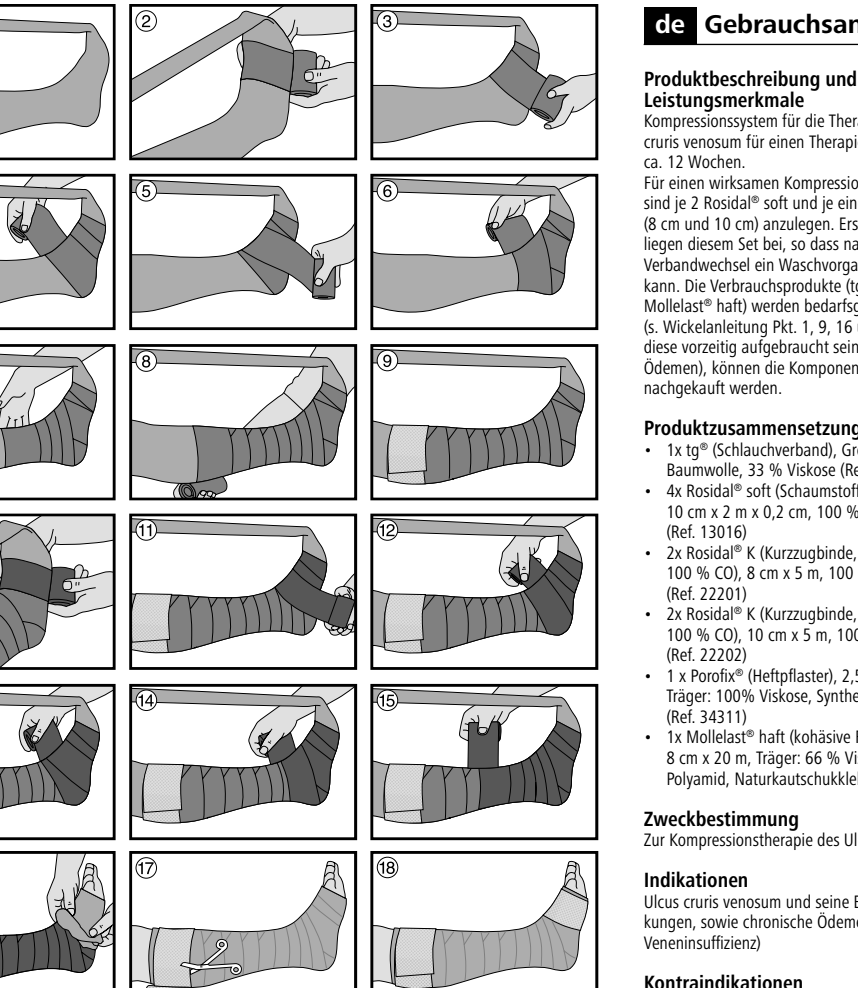
Lábszárfékely kompressziós rendszer

Systém do kompresji w przypadku owrzodzenia

Kompresijski sistem za golenje razjede

Kompresivni sustav za potkoljenični ulkus

Bacak ülseri kompresyon sistemi



de Gebrauchsanweisung

Produktbeschreibung und Leistungseigenschaften
Kompressionsystem für die Therapie des Ulcus cruris venosum für einen Therapiezeitraum von ca. 12 Wochen.

Für einen wirksamen Kompressionsverband sind je 2 Rosidal® soft und je eine Rosidal® K (8 cm und 10 cm) anzulegen. Ersatzbinden liegen diesem Set bei, so dass nach jedem Verbandwechsel ein Waschvorgang erfolgen kann. Die Verbrauchsprodukte (tg®, Porofix® und Mollelast® haft) werden bedarfsgerecht mit 1 Rosidal® K (8 cm und 10 cm) und 1 Rosidal® soft (je nach Umfang des Wundes) geliefert. Die Wickelanleitung Plt. 1, 9, 16 und 17. Sollten diese vorzeitig aufgebraucht sein (z. B. bei massiven Ödemen), können die Komponenten auch einzeln nachgekauft werden.

Produktzusammensetzung

- 1x tg® (Schlauchverband), Größe 7, 20 m, 67 % Baumwolle, 33 % Viskose (Ref. 24005)
- 4x Rosidal® soft (Schaumstoffbinde, weiß), 10 cm x 2 m x 0,2 cm, 100 % Polyurethan (Ref. 13016)
- 2x Rosidal® K (Kurzzugbinde, cremefarben, 100 % CO, 10 cm x 5 m, 100 % Baumwolle (Ref. 22201))
- 2x Rosidal® K (Kurzzugbinde, cremefarben, 100 % CO), 10 cm x 5 m, 100 % Baumwolle (Ref. 22202)

- 1x Porofix® (Helftpflaster), 2,5 cm x 5 m, 100 % Viskose, Syntheschauschkleber (Ref. 34311)
- 1x Mollelast® haft (Kohäsive Fieberbinde, weiß), 8 cm x 20 m, Träger: 66 % Viskose, 34 % Polyamid, Naturkautschukleber (Ref. 30070)

Zweckbestimmung

Zur Kompressionstherapie des Ulcus cruris venosum (siehe Illustrationen).

Indikationen

Ulcus cruris venosum und seine Begleitkrankheiten, sowie chronische Ödeme (aufgrund einer Veneninsuffizienz)

Verwendungsanweisung

Fortgeschrittene periphere arterielle Verschlusskrankheiten, dekompensierte Herzinsuffizienz, septische Phlebitis, Plegmiasis coerulea dolens, Sensibilitätsstörungen der Haut, bekannte Allergien und/oder Überempfindlichkeit gegenüber Produktkomponenten.

Nebenwirkungen

In sehr seltenen Fällen können Hautirritationen und/oder Allergien auftreten.

Warnhinweise und Vorsichtsmaßnahmen

- Unschonmäßiges Bandagieren kann Hautnekrosen und nevrale Druckschäden zur Folge haben.
- Eine leichte Blaufärbung der Zehen ist normal, diese muss verschwinden sobald der Patient zu gehen beginnt.
- Verschwinden die Symptome (Schmerz und Blaufärbung) nicht, muss der Verband entfernt und ein weiteres Mal, mit geringerer Kompression, angelegt werden.
- Bei stark zunehmenden Schmerzen während des Applikationsvorganges muss der Patient in den Arztbesuch anfragen.
- Anwendung bei einem Kniechke-Arm-Index (ABPI) größer als 0,8 oder bei einem ABPI von 0,5 – 0,8 – nur unter ärztlicher Kontrolle.
- Bei Diabetes mit fortgeschrittener Mikroangiopathie – nur unter ärztlicher Kontrolle anwenden.

Pflegeempfehlung

- Rosidal® K bis zu 50 x waschbar bei 95 °C (handelsübliches Feinwaschmittel/Schonwaschgang).
- Rosidal® soft: 50 x waschbar bei 95 °C (handelsübliches Feinwaschmittel/Schonwaschgang). Nicht trocknergeeignet, nicht bügeln.

Anwendungshinweise

- Zur Wiederverwendung an einem einzelnen Patienten.
- Der Kompressionsverband kann bis zu 7 Tagen am Bein verbleiben, abhängig von Wundstatus und Zustand der Binde erhöhen. Bitte! beim Anlegen der Wickeltechnik erfolgt in Abstimmung mit dem behandelnden Arzt.
- Rosidal® K immer unter vollem Zug (max. Dehnung) anlegen.
- Es wird empfohlen, den Verband morgens anzuwenden und mit Zug am Bein angelegt werden, dass bei Druck der Binde vom Fuß zum Knie und ggf. bis zur Gesäßfalte hin abnimmt.
- Die Bindebereiche sollte dem Durchmesser des zu verbindenden Körperteils entsprechen.
- Die Binde muss mit Zug am Bein angelegt werden, dass bei Druck der Binde vom Fuß zum Knie und ggf. bis zur Gesäßfalte hin abnimmt.

Vorbereitung

- Die üblichen diagnostischen Untersuchungen zum Gefäßstatus sind vor Verbandanlege

fr Mode d'emploi

Description du produit et caractéristiques de performance
Système de compression pour le traitement de l'ulcère variqueux pendant une période d'environ 12 semaines.

Pour un empaquetement efficace, respectivement 2 Rosidal® soft et un Rosidal® K (8 cm et 10 cm) doivent être posés. Des bandes de rechange sont jointes à ce set de façon à pouvoir effectuer une procédure de lavage après chaque changement de bandage. Les consommables (tg®, Porofix® et Mollelast® haft) sont livrés conformément aux besoins (voir consignes d'enroulement sur la bande (extrémité avant de la bande) dont l'étiquette orientée vers l'extérieur. Serrez étroitement l'extrémité avant de la bande sur la jambe.

Composition du produit

- 1x tg® (bandage tubulaire), taille 7, 20 m, 67 % coton, 33 % viscose (Ref. 24005)
- 4x Rosidal® soft (bande à allongement court, couleur crème, 100 % CO), 8 cm x 5 m, 100 % coton (Ref. 22201)
- 2x Rosidal® K (bande à allongement court, couleur crème, 100 % CO), 10 cm x 5 m, 100 % coton (Ref. 22202)

Consignes d'enroulement (modifiées selon SigG)

- Le bandage tubulaire est coupé sur env. 2,5 cm de la longueur entre la plante et le talon.
- Le mollet est enroulé dans le sens de la traction normal - le genou. La moitié est enfilée sur le mollet jusque sous le coude. Mettre la moitié qui dépasse dans la main du patient pour que le pied garde une position de 90 degrés dans l'articulation de la cheville.
- Partir de Rosidal® soft au niveau du cou-de-pied sur la partie intérieure avec enveloppement de l'articulation métatarso-phalangienne.
- Les tours de bande se chevauchent toujours d'environ 1/2 - 2/3.
- Tous de bande dans un mouvement circulaire jusqu'au talon avec enroulement du talon.
- Tour de bande du talon sous le talon (vers la plante du pied).
- Tour de blocage du talon au-dessus du talon (vers le tendon d'Achille).
- Tous de bande dans les circonférences supplémentaires jusqu'à la base du mollet.
- Le mollet est enroulé dans le deuxième sens de la traction normal - le genou. Rosidal® soft dans un bandage en huit.
- Fixation de l'extrémité de la bande sous la rotule avec un tour circulaire de Mollelast® haft.
- Base de la bande de compression Rosidal® K (8 cm de largeur) au niveau du cou-de-pied sur la partie intérieure avec enveloppement de l'articulation métatarso-phalangienne.
- Les tours de bande se chevauchent toujours d'environ 1/2 - 2/3. Toujours poser Rosidal® K avec une traction maximale (allongement max.).
- Tous de bande dans un mouvement circulaire jusqu'au talon avec enveloppement du talon.
- Tour de blocage du talon sous le talon (vers la plante du pied).
- Tour de blocage du talon au-dessus du talon (vers le tendon d'Achille) et tours de bande circulaires supplémentaires jusqu'à la base du mollet.
- Le mollet est enveloppé avec Rosidal® K (10 cm de largeur) dans un bandage en huit.
- Fixation de l'extrémité de la bande sous la rotule avec une bande Porofix®. Le bandage tubulaire tg® se terminant aux orteils est tiré par-dessus le pied.
- La fixation du bandage tubulaire tg® s'auspice à l'articulation du genou et au niveau de l'os pétais est effectuée avec un tour circulaire de Mollelast® haft.
- Bandage achevé.

Intended purpose

For venous leg ulcer compression therapy (see illustrations).

Indications

Venous leg ulcers and their comorbidities, as well as chronic oedema (due to venous insufficiency)

Contraindications

Advanced peripheral arterial occlusive disease, decompensated heart failure, septic phlebitis, plegmiasis coerulea dolens, sensation disorders of the skin, known allergies and/or hypersensitivity to product components.

Side effects

In very rare cases skin irritations and/or allergies may occur.

Warnings and precautions

- Incorrect bandaging can result in skin necrosis and pressure damage to nerves.
- Slight bluish tinge to the toes is normal, this should disappear as soon as the patient starts to walk.
- If the symptoms (pain and bluish tinge) do not disappear, the bandage must be removed and the patient informed by their doctor.
- The patient must inform their doctor if sharply increasing pain occurs while wearing the bandage.
- With an Ankle Brachial Pressure Index (ABPI) greater than 0.8 or with an ABPI of 0.5-0.8 – use only under medical supervision.
- Always apply Rosidal® K with full tension (max. stretch).
- It is recommended to apply the bandage in the morning before the patient gets up or after the patient has rested the leg in a raised position for a prolonged period and to then encourage the patient to walk.
- The width of the bandage should correspond to the diameter of the extremity to be banded.
- The bandage should be applied with tension around the leg in such a way that the pressure from the bandage decreases from the foot to the return.

Contraindications

Advanced peripheral arterial occlusive disease, decompensated heart failure, septic phlebitis, plegmiasis coerulea dolens, sensation disorders of the skin, known allergies and/or hypersensitivity to product components.

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Elimination

In Europe, one code of déchet du Chapitre 18 01 de la Directive du catalogue européen des déchets (catalogue européen des déchets – CED, AVV en Allemagne) peut être affecté aux déchets de produits et un code de déchet du Chapitre 15 01

de cette même directive peut être affecté aux déchets d'emballage. Les emballages recyclables doivent être déposés dans les systèmes de recyclage nationaux correspondants.

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en Instructions for use

Product description and performance characteristics
Compression system for the treatment of venous leg ulcers over a period of approx. 12 weeks.

For an effective compression bandage, apply 2 Rosidal® soft and one Rosidal® K (8 cm and 10 cm) each time. Replacement bandages are included in this set to allow washing after each dressing change. Use the consumables (tg®, Porofix® and Mollelast® haft) as needed (see bandaging instructions, items 1, 9, 16 and 17). If these are used up more quickly than expected (e.g. in cases of extensive oedema), the components can also be bought separately.

Composition of the product

- 1x tg® (tubular bandage), size 7, 20 m, 67% cotton, 33% viscose (Ref. 24005)
- 4x Rosidal® soft (foam bandage, white), 10 cm x 2 m x 0.2 cm, 100% polyurethane (Ref. 13016)
- 2x Rosidal® K (short stretch bandage, cream-coloured, 100% CO), 8 cm x 5 m, 100% cotton (Ref. 22201)
- 2x Rosidal® K (short stretch bandage, cream-coloured, 100% CO), 10 cm x 5 m, 100% cotton (Ref. 22202)

Consignes d'enroulement (modifiées selon SigG)

- Cut the tubular bandage to approx. 2.5 times the length from the end of the toes to the heel to keep and pull half of the bandage over the lower leg to below the knee. Have the patient hold the half that is still hanging off to keep the foot at an angle of 90 degrees to the ankle.
- Start applying Rosidal® soft from the top of the foot going around the inside of the instep including the base of the toes.
- The turns of the bandage should always overlap by approx. 1/2 - 2/3.
- Spiral wrap the heel including the heel.
- Return down around the ankle to secure the heel (towards the sole).
- To finish securing the heel, wrap above the ankle (towards the Achilles tendon).
- Continue to spiral wrap to the base of the calf muscles.
- Wrap the calf using a figure of eight pattern with Rosidal® soft.
- Secure the end of the bandage below the kneecap by wrapping the Mollelast® haft once around.
- Start applying the compression bandage Rosidal® K (8 cm wide) at the top of the foot going around the inside of the instep including the base of the toes.
- The turns of the bandage always overlap by approx. 1/2 - 2/3. Always apply Rosidal® K with full tension (max. stretch).
- Spiral wrap around the heel including the heel (towards the sole).
- To finish securing the heel, wrap above the ankle (towards the Achilles tendon) and continue to spiral wrap to the base of the calf muscle.
- Wrap the calf using a figure of eight pattern with Rosidal® soft.
- Secure the end of the bandage below the kneecap with a strip of Porofix®. Pull the tg® tubular bandage ending at the toes over the ankle to the knee.
- Secure the tg® tubular bandage below the knee and on the forefoot by wrapping Mollelast® haft around the ankle (towards the heel).
- The finished bandage.

Intended purpose

For venous leg ulcer compression therapy (see illustrations).

Indications

Venous leg ulcers and their comorbidities, as well as chronic oedema (due to venous insufficiency)

Contraindications

Advanced peripheral arterial occlusive disease, decompensated heart failure, septic phlebitis, plegmiasis coerulea dolens, sensation disorders of the skin, known allergies and/or hypersensitivity to product components.

Side effects

In very rare cases skin irritations and/or allergies may occur.

Warnings and precautions

- Incorrect bandaging can result in skin necrosis and pressure damage to nerves.
- Slight bluish tinge to the toes is normal, this should disappear as soon as the patient starts to walk.
- If the symptoms (pain and bluish tinge) do not disappear, the bandage must be removed and the patient informed by their doctor.
- The patient must inform their doctor if sharply increasing pain occurs while wearing the bandage.
- With an Ankle Brachial Pressure Index (ABPI) greater than 0.8 or with an ABPI of 0.5-0.8 – use only under medical supervision.
- Always apply Rosidal® K with full tension (max. stretch).
- It is recommended to apply the bandage in the morning before the patient gets up or after the patient has rested the leg in a raised position for a prolonged period and to then encourage the patient to walk.
- The width of the bandage should correspond to the diameter of the extremity to be banded.
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Contraindications

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Composition of the product

- 1x tg® (tubular bandage), size 7, 20 m, 67% cotton, 33% viscose (Ref. 24005)
- 4x Rosidal® soft (foam bandage, white), 10 cm x 2 m x 0.2 cm, 100% polyurethane (Ref. 13016)
- 2x Rosidal® K (short stretch bandage, cream-coloured, 100% CO), 8 cm x 5 m, 100% cotton (Ref. 22201)
- 2x Rosidal® K (short stretch bandage, cream-coloured, 100% CO), 10 cm x 5 m, 100% algodón (Ref. 22202)

Consignes d'enroulement (modifiées selon SigG)

- Cut the tubular bandage to approx. 2.5 times the length from the end of the toes to the heel to keep and pull half of the bandage over the lower leg to below the knee. Have the patient hold the half that is still hanging off to keep the foot at an angle of 90 degrees to the ankle.
- Start applying Rosidal® soft from the top of the foot going around the inside of the instep including the base of the toes.
- The turns of the bandage should always overlap by approx. 1/2 - 2/3.
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- To finish securing the heel, wrap above the ankle (towards the Achilles tendon).
- Continue to spiral wrap to the base of the calf muscles.
- Wrap the calf using a figure of eight pattern with Rosidal® soft.
- Secure the end of the bandage below the kneecap by wrapping the Mollelast® haft once around.
- Start applying the compression bandage Rosidal® K (8 cm wide) at the top of the foot going around the inside of the instep including the base of the toes.
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- Secure the tg® tubular bandage below the knee and on the forefoot by wrapping Mollelast® haft around the ankle (towards the heel).
- The finished bandage.

Intended purpose

For venous leg ulcer compression therapy (see illustrations).

Indications

Venous leg ulcers and their comorbidities, as well as chronic oedema (due to venous insufficiency)

Contraindications

Advanced peripheral arterial occlusive disease, decompensated heart failure, septic phlebitis, plegmiasis coerulea dolens, sensation disorders of the skin, known allergies and/or hypersensitivity to product components.

Side effects

In very rare cases skin irritations and/or allergies may occur.

Warnings and precautions

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- Return down around the ankle to secure the heel (towards the sole).
- To finish securing the heel, wrap above the ankle (towards the Achilles tendon).
- Continue to spiral wrap to the base of the calf muscles.
- Wrap the calf using a figure of eight pattern with Rosidal® soft.
- Secure the end of the bandage below the kneecap by wrapping the Mollelast® haft once around.
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- Secure the tg® tubular bandage below the knee and on the forefoot by wrapping Mollelast® haft around the ankle (towards the heel).
- The finished bandage.

Intended purpose

For venous leg ulcer compression therapy (see illustrations).

Indications

Venous leg ulcers and their comorbidities, as well as chronic oedema (due to venous insufficiency)

Contraindications

Advanced peripheral arterial occlusive disease, decompensated heart failure, septic phlebitis, plegmiasis coerulea dolens, sensation disorders of the skin, known allergies and/or hypersensitivity to product components.

Side effects

In very rare cases skin

