**Wound factors**

- **T**issue non-viable: necrotic tissue or slough present
- **I**nflammation and/or infection: high bacterial counts, increased exudate, surface discoloration or increased odour
- **M**oisture imbalance: heavy exudate – risk of maceration, or dry wound bed – risk of desiccation
- **E**dge of wound not advancing: e.g. chronic wound with prolonged inflammation

**Clinical action**

- **T** Remove defective tissue: debride
- **I** Remove or reduce bacterial load: topical antimicrobials, debridement of devitalised tissue
- **M** Restore moisture balance: absorb exudate, or add moisture to dry wounds
- **E** Address T/I/M issues

**Suggested product solution**

- INTRASITE® Gel
- SOLOSITE® Gel
- INTRASITE® Conformable
- IODOSORB® Range
- VERSAJET® II
- ACTICOAT® Range
- ALLEVYN® Ag Range
- DURAFIBER®
- INTRASITE® Range
- SOLOSITE® Gel
- RENASYS®
- PICO®

**Wound healing outcome**

- **V**iable (vascularised) wound bed
- **R**educed inflammation
- **O**ptimal moisture balance

*NB: Debridement should not be undertaken until vascular status has been established.

*NB: Systemic antibiotics may be required for infected wounds.*

*Adapted from Schultz G et al. (2003)*

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