

OptiView™

Transparent Dressing with HydroCore® Technology.



**Skin
Health**

The clear solution for pressure injury prevention

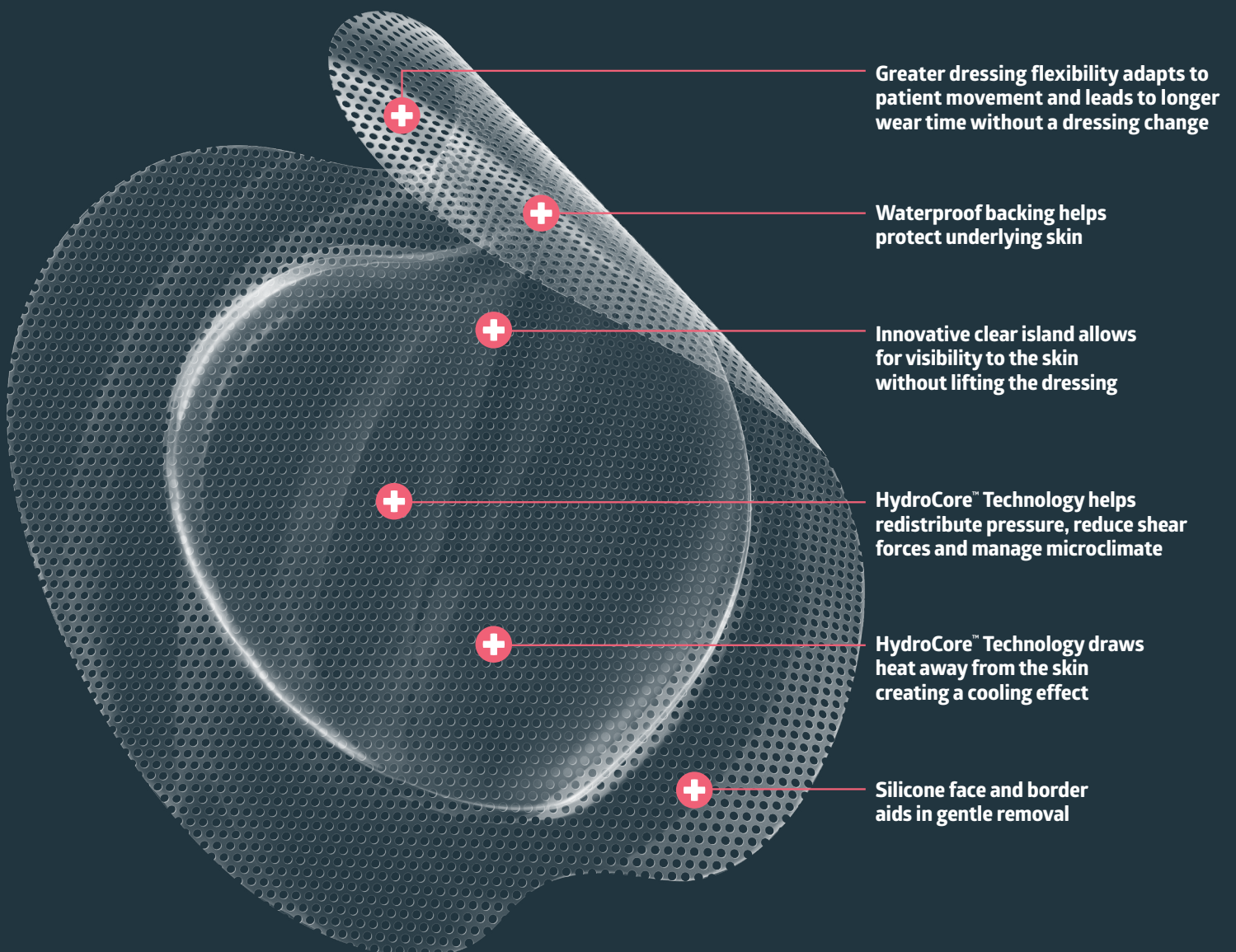
**Advanced
Wound Care**



Pressure injury prevention has never been so clear

Transparent HydroCore™ island takes the guesswork out of skin assessments, leading to less dressing changes and longer wear time.

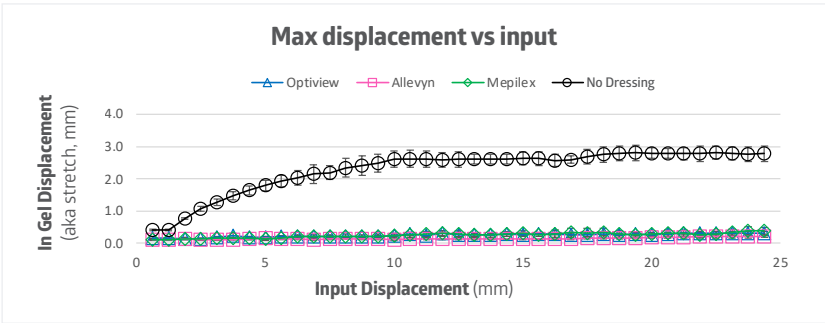
OptiView™ is designed to be used as part of a pressure injury prevention protocol and is ideal to reduce pressure over intact skin to help maintain the skin integrity. The unique design lets you spend less time changing dressings, and more time focusing on patient care.



STUDY 1: SHEAR*

OptiView reduces shear as well as a 5-layer foam

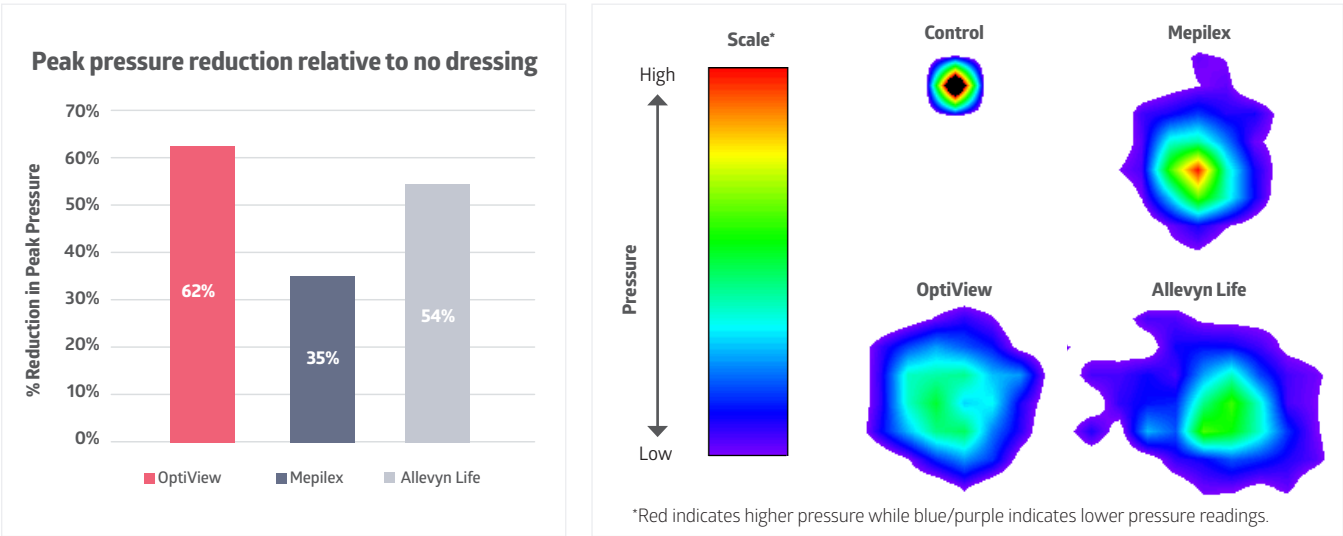
Problem	Shear forces (i.e., gravity force pushing down on the patient’s body with resistance between the patient and the chair or bed) contribute to an increased risk of pressure injuries.
Study method	The sacral dressings were applied onto a gel containing blue beads, a skin substrate, and the system was subjected to stress. The strain on the skin substrate was measured to determine shear displacement.
Results	This study showed that OptiView reduces shear as well as other market leading foam dressings.



STUDY 2: PRESSURE MAPPING*

OptiView reduces peak pressure by as much as 62%

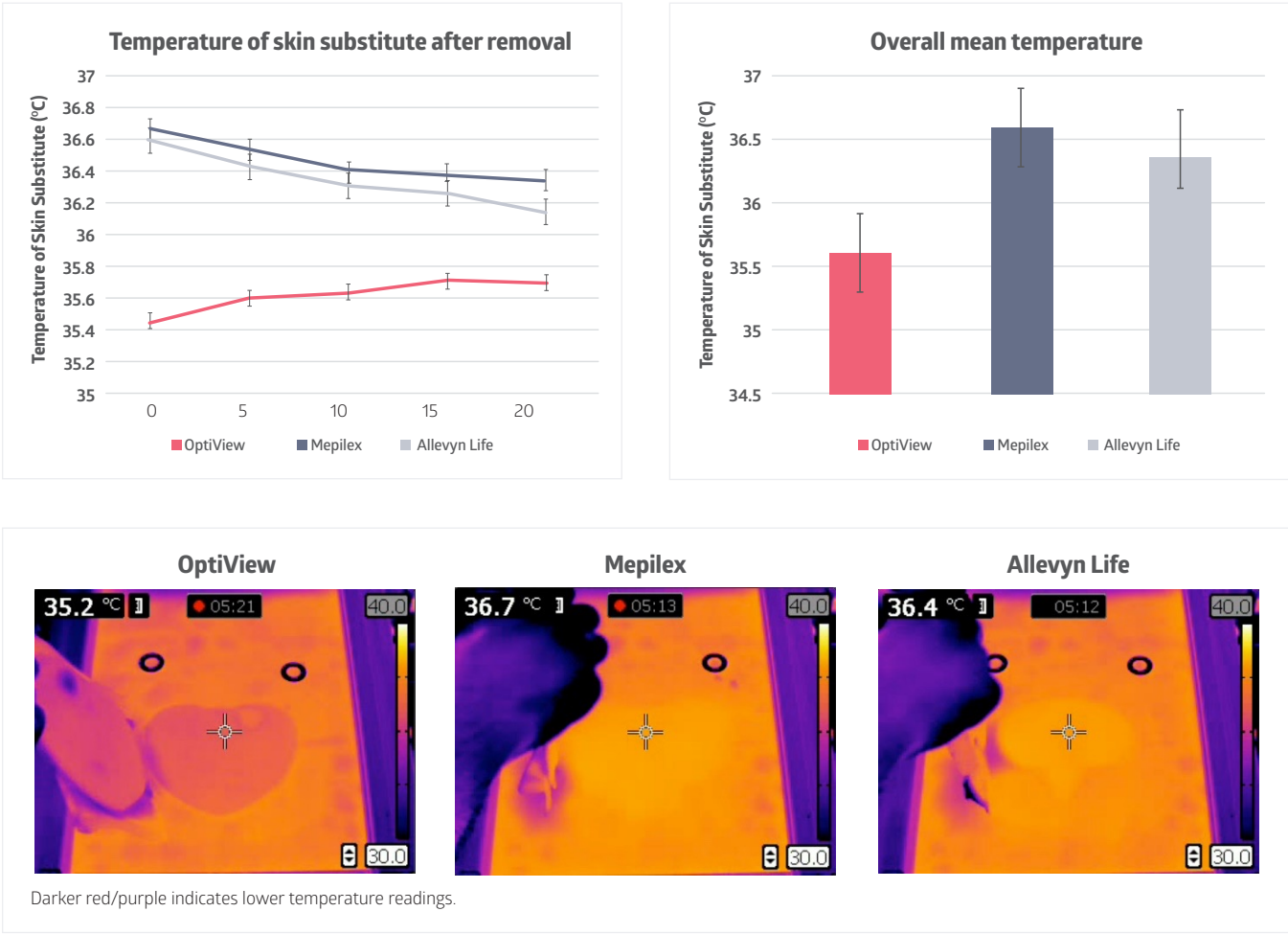
Problem	Pressure against a bony prominence (sacrum, hips, elbows, shoulders) can damage at-risk skin.
Study method	A 2.1 kg, 4-inch diameter sphere was used to mimic a bony prominence. The weight was then placed on top of the adhesive side of the dressing (facing up), and pressure distribution data was collected by a surface pressure mapping system over approximately 5 minutes.
Results	OptiView had the highest peak pressure reduction among market-leading dressings, reducing peak pressure by 62%.



STUDY 3: TEMPERATURE*

OptiView helps keep skin cooler

Problem	Excess heat on the skin can greatly increase the risk of pressure injury development. Studies show that for every 1° C increase in temperature there is a 10% increase in metabolic demand on the skin, leading to an increased risk of breakdown. ²
Study method	Each dressing was applied to the skin substitute heated to body temperature, 37° C, by a hot plate and allowed to stabilize for 5 minutes, and then the dressing was removed. The temperature of the skin substitute was monitored over time using a thermal camera.
Results	OptiView had significantly lower thermal heat trapped as shown by the thermal images (see below) compared to the other leading dressings, helping to decrease the risk of pressure injury development.

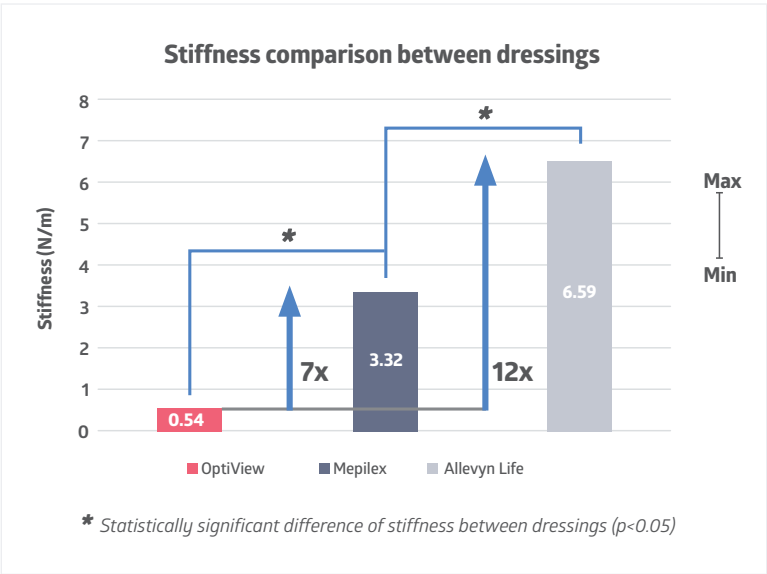


STUDY 4: FLEXIBILITY*

OptiView is up to 12x more flexible than a 5-layer foam

Problem	To maximize effectiveness, prophylactic dressings need to stay in place. Flexibility is a key factor to improved wear time.
Study method	Market leading dressings were tested per ASTM D882. Six samples were tested in the cranio-caudal direction, pulled at 10 mm/min and to failure or 2.5" elongation to measure stiffness (N/m).
Results	OptiView is up to 12x more flexible than traditional multi-layer foams, which allows the dressing to stay in place longer, reducing the number of dressing changes.

7x more flexible than Mepilex Border¹



12x more flexible than Allevyn Life¹

OptiView™ helps reduce the risk of pressure injuries

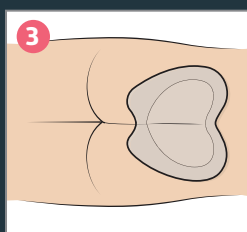
OptiView follows the best practice guidelines of the National Pressure Injury Advisory Panel and other international pressure injury organizations when considering the appropriate prophylactic dressing.³



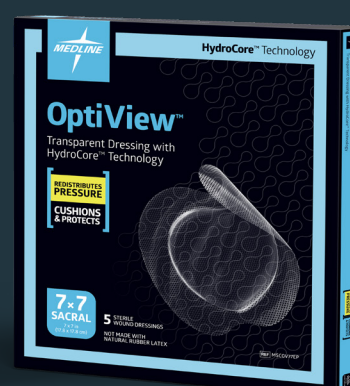
1 Position patient on their side. Remove center release liner. Fold dressing in half, anchor dressing in gluteal fold.



2 Remove release liner from upper side of dressing and smooth upward away from the bed and repeat on other side.



3 Gently secure the dressing to the skin.



Ordering information

Item No.	Description	Pkg.
MSCOVM6EP	OptiView Clear Dressing, Multisite, 6" x 6"	50/cs
MSCOV77EP	OptiView Clear Dressing, Sacrum, 7" x 7"	40/cs
MSCOV99EP	OptiView Clear Dressing, Sacrum, 9" x 9"	25/cs

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*Data on file

References: 1. Study on file. 2. Brown AC, Brengelmann G. Ch. Energy metabolism. In: Ruch RC, Patton HD, editors. Physiology and biophysics. 19th ed. Philadelphia, PA: WB Saunders; 1965. Chapter 53, p. 1030-49. 3. European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel and Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline. The International Guideline. Emily Haesler (Ed). EPUAP/NPIAP/PPPIA: 2019. https://www.internationalguideline.com/static/pdfs/Quick_Reference_Guide-10Mar2019.pdf. Accessed April 1, 2021.

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