

The significance of healthcareacquired skin damage.

Healthcare-acquired skin damage represents negative clinical outcomes resulting in potential complications such as infection, pain and suffering, and a poor patient/resident experience. In addition, skin damage increases the work and cost of care.

Protecting skin from adhesive products, moisture, friction and shear is a critical part of patient/resident care and helps reduce the risk of skin breakdown from common, preventable skin injuries including:

Medical Adhesive-Related Skin Injury (MARSI)

A prevalent but under-recognized complication, MARSI can cause pain, increase the risk of infection and delay healing – all of which can reduce a patient's/resident's quality of life¹. Common but avoidable examples of MARSI include skin tears, skin stripping and tension blisters. Skin integrity around vascular access sites is of special concern due to the potential increase in risk for infection and complexity of care.







Tension blister



Skin stripping



of oncology patients

developed MARSI at their PICC insertion site over the course of two weeks²



treatments for MARSI

will be needed for every 100 patients who receive a medical tape application³

Moisture-Associated Skin Damage (MASD)

A term that describes several types of damage that occur when skin is exposed to excessive moisture and/or irritants. Common forms of MASD include:



Peristomal Skin Damage

Problem stomas, poor stoma location and high-volume output, especially that of liquid stool, can contribute to skin injury that can rapidly progress to erosion.



Periwound Skin Damage

This type of skin damage is often associated with wounds that produce large quantities of drainage, such as venous ulcers or infected wounds.



Intertriginous Dermatitis (ITD)

Skin damage between skin surfaces due to the interaction of friction and moisture.

Pressure Ulcer/Injury (PU/I)

Localized damage to the skin and underlying soft tissue, usually over a bony prominence or related to a medical device. Moisture, friction and shear are accepted as risk factors for pressure ulcer/injury development.



Sacral pressure ulcer



Heel pressure ulcer



First to market. Only one of its kind.

3M™ Cavilon™ No Sting Barrier Film is the original and only terpolymer-based alcohol-free barrier film* that helps prevent skin damage before it occurs.

Its unique formulation of polymers forms a sting-free, waterproof, protective coating that is breathable and transparent, allowing for continuous visualization and monitoring of skin. It is also flexible and conforms to the skin during movement or position changes.

*Of leading competitors in the market, based on disclosed ingredient information.

Proven chemistry. Powerful impact.



Durable

Fast-drying⁴, longlasting, waterproof and doesn't wash off⁵, making it easy for clinicians to use.



Effective

Helps maintain a continuous protective coating, plus it's sterile* and compatible with chlorhexidine gluconate (CHG)⁶, making it essential for vascular access site protection.





Gentle

Alcohol-free, sting-free, painfree, fragrance-free, preservative-free and hypoallergenic⁷, helping reduce the potential for dermatitis.



Versatile

Helps protect skin from friction and abrasion⁷, an improvement over many creams, ointments and pastes that can increase friction at the skin surface.



Proven

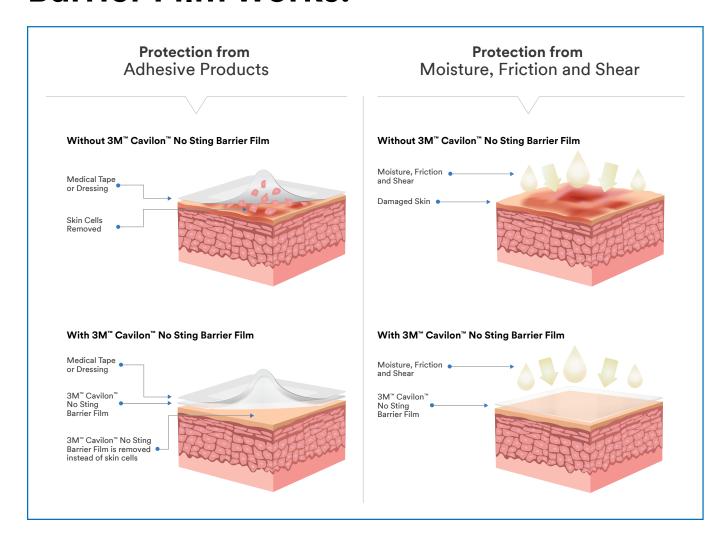
Unique formulation supported by 80+ pieces of evidence.



With 80+ pieces of evidence supporting its efficacy and costeffectiveness, 3M™ Cavilon™ No Sting Barrier Film is ideal for routine protection of intact skin:

- Under adhesive products, including vascular access dressings and devices, tape, wound dressings and ostomy barriers
- Around stomas and tracheostomies
- Around wounds in areas exposed to moisture, friction and shear

How 3M[™] Cavilon[™] No Sting Barrier Film works.



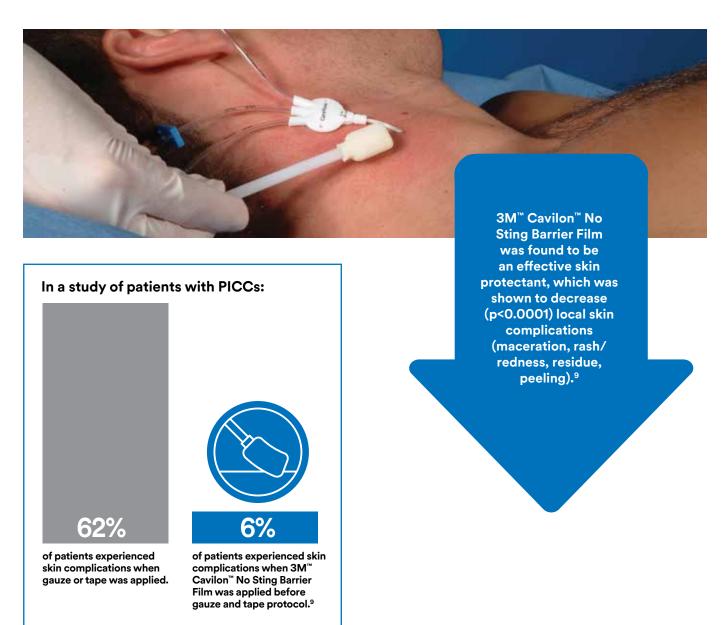
Routine skin protection supported by professional standards of practice.



The 2016 Infusion Nursing Society Standards of Practice recommend the use of a "barrier solution to skin exposed to adhesive dressings to reduce the risk of MARSI".8

Making 3M[™] Cavilon[™] No Sting Barrier Film a routine part of vascular site care helps ensure the skin around the insertion site is protected.

Adding 3M[™] Cavilon[™] No Sting Barrier Film to catheter insertion and dressing change kits provides a barrier solution to help prevent MARSI, support protocols and standardize care delivery.



A clear advantage over traditional skin barriers.

There might be many skin barrier options available, but not all barriers are created equal. Some still contain alcohol and can cause pain on application. Others wipe away or wash off. And still others don't hold up to moisture, leaving skin vulnerable. Featuring 3M's unique polymer chemistry, 3M™ Cavilon™ No Sting Barrier Film offers clear advantages over traditional ointments or creams:

- ✓ Allows adhesion: 3M[™] Cavilon[™] No Sting Barrier Film allows adhesion of tapes, dressings and devices
- Transparency: 3M™ Cavilon™ No Sting Barrier Film allows visualization of the underlying skin
- ☑ Breathability: 3M™ Cavilon™ No Sting Barrier Film allows moisture vapor transmission from the skin, helping to reduce risk of Moisture Associated Skin Damage (MASD)
- Comfort during wear: 3M™ Cavilon™ No Sting Barrier Film forms a thin, conformable, non-sticky coating on the skin
- Convenience: With 3M™ Cavilon™ No Sting Barrier Film, removal is not required, avoiding the mess and time required for ointments and creams



3M[™] Cavilon[™] No Sting Barrier Film was 2X faster to apply versus zinc oxide ointment and petroleum-based barrier preparations.¹⁰

Make 3M[™] Cavilon[™] No Sting Barrier Film part of your care process. Visit **3M.com/BarrierFilm** to learn more.

Ordering Information 3M™ Cavilon™ No Sting Barrier Film

Cat No	Product	Size	Wound Care Product	Items/ Box	Boxes/ Case	HCPCS Code	
						Ostomy	Wound
3343	8333-3343-01	1 mL	wand	25	4	A4369	A6250
3344	8333-3344-01	1 mL	wipe	30	4	A5120	A6250
3345	8333-3345-01	3 mL	wand	25	4	A4369	A6250
3346	8333-3346-01	28 mL	spray	12	1	A4369	A6250



HCPCS codes have been provided to assist you in the preparation of insurance claims. Please note, however, that the reimbursement information provided by 3M Health Care and its representatives is intended to provide general information relevant to coverage and coding for 3M products. Insurers' reimbursement policies can vary and the use of the codes discussed here does not guarantee that an insurer will cover or pay at any particular level. Health care providers should exercise independent clinical judgment in choosing the codes which most accurately describe the products provided.

Purchasing 3M™ Cavilon™ Products

To order Cavilon products, visit 3M.com/Cavilon to find a distributor, contact your 3M Critical & Chronic Care Representative or call the 3M Helpline at 1-800-228-3957. Outside of the United States, contact the local 3M subsidiary.



Discover all the ways 3M™ Cavilon™ Skin Care Solutions can help you transform patient skin integrity at 3M.com/Cavilon

'Cutting KF. Impact of adhesive surgical tape and wound dressing on the skin with reference to skin stripping. J Wound Care 2008;157-158,160-162.

²Zhao H, et al. Prevalence of medical adhesive-related skin injury at peripherally inserted central catheter insertion site in oncology patients. J Vasc Access. 2017 Nov 8:0. doi: 10.5301/jva.5000805. [Epub ahead of print]

³Maene, B. Hidden costs of medical tape-induced skin injuries. Wounds UK. 2013; 9(1), 46-50.

43M data on file. TEAM-MISC-05-001563, CLIN-RPT-FINAL-INV-US-05-289804 (dry time).

53M data on file. CLIN-RPT-FINAL-ICH2-US-05-291160.

 6 3M data on file. TEAM-MISC-05-005732 and SPONSOR FINAL RPT-05-002049.

⁷Campbell K, Woodbury MG, Whittle H, Labate T, Hoskin A. A clinical evaluation of 3M™ Cavilon™ No Sting Barrier Film. Ostomy Wound Management.

⁸Gorski L, Hadaway L, Hagle ME, McGoldrick M, Orr M, Doellman D. Infusion therapy standards of practice. J Infus Nurs. 2016;39 (suppl 1): S 73,82.

^oGeorge M. Use of a barrier film (3M[™] Cavilon[™] No Sting Barrier Film) to reduce local skin complications around peripherally inserted central catheter lines: a randomized prospective controlled study. WCET Journal. 2016; 36(4):8-13.

¹⁰Coutts P, Queen D, Sibbald RG. Periwound skin protection: a comparison of a new skin barrier vs. traditional therapies in wound management. Wound Care Canada. 2003; 1(1).



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