

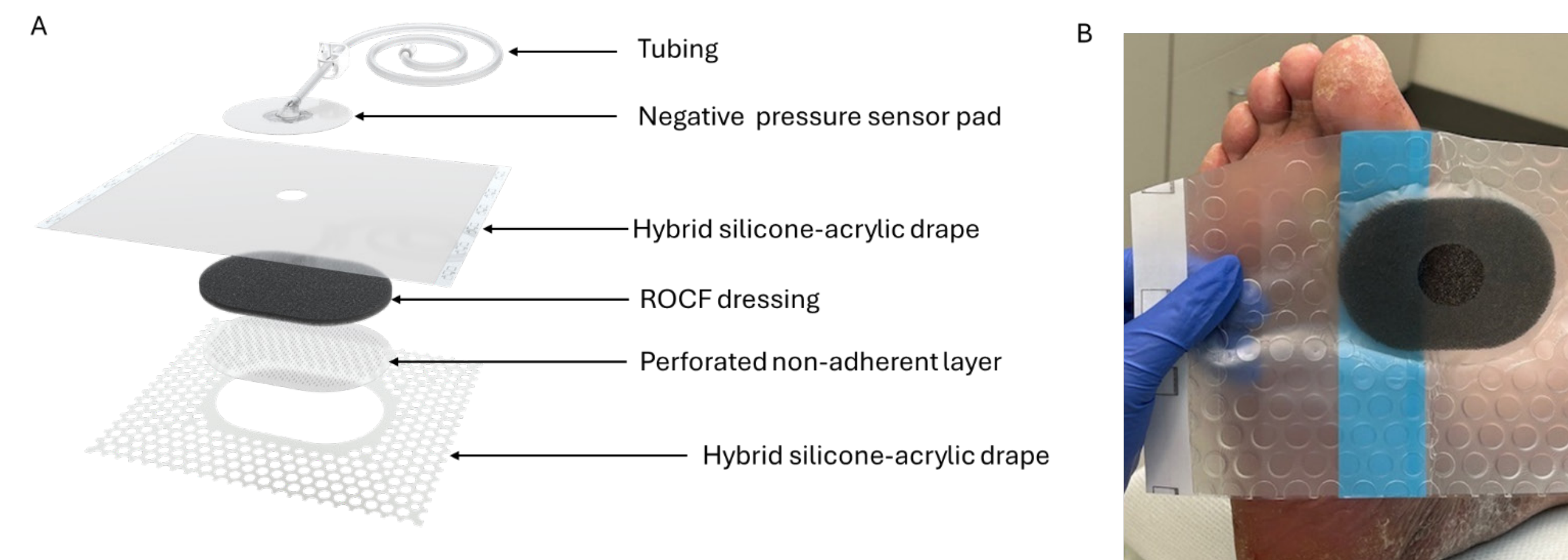
# Negative Pressure Wound Therapy with All-in-One Dressing: Recommendations for Best Practices

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## Introduction

- A new dressing configuration that allows for up to 7 days of wear is available for use with negative pressure wound therapy (NPWT\*).
- This all-in-one dressing<sup>†</sup> combines a reticulated open cell foam dressing, perforated non-adherent contact layer, and acrylic-silicone hybrid drape (**Figure 1**).
- As this dressing has only recently become available for use, limited evidence exists.



**Figure 1.** Image of all-in-one dressing. A. Individual components of the dressing; B. Application of dressing. ROCF= reticulated open cell foam dressing.

## Purpose

- A panel meeting was held to develop best practice recommendations for the use of NPWT with all-in-one dressing.

## Methods

- An in-person meeting with 8 experts was held on September 3, 2025, in Las Vegas, NV.
- Panelists included a wound care nurse (n=1), nurse practitioners (n=3), podiatrists (n=2), a plastic and reconstructive surgeon (n=1), and an internal medicine physician (n=1).
- Patient and wound characteristics, therapy settings, application techniques, and best practice recommendations were discussed.

## Results

### Care Setting Recommendations

- Panel members recommended NPWT with all-in-one dressing use in both inpatient and outpatient care settings (**Table 1**).

**Table 1.** Recommended care settings

Recommended Care Settings
<ul style="list-style-type: none"> <li>• Acute care hospitals</li> <li>• Skilled nursing facilities</li> <li>• Short-term rehabilitation facilities</li> <li>• Outpatient clinics</li> <li>• Clinician offices</li> <li>• Home health</li> </ul>

### Patient Characteristic Recommendations

- Patient characteristics recommended for all-in-one dressing use include: patients that report pain with traditional NPWT, patients transitioning to outpatient care, and patients that can adhere to the treatment plan (**Table 2**).

**Table 2.** Recommended patient characteristics

Recommended Patient Characteristics
<ul style="list-style-type: none"> <li>• Patients in acute care for short duration</li> <li>• Patients transitioning to outpatient care</li> <li>• Patients that report pain with traditional NPWT</li> <li>• Patients that adhere to recommended treatment plan</li> </ul>

### Wound Type Recommendations

- Wound types recommended for all-in-one dressing use include: chronic wounds, acute wounds, traumatic wounds, flaps, grafts, and donor sites (**Table 3**).

## Results (Cont'd)

**Table 3.** Recommended wound types

Recommended Wound Types
<ul style="list-style-type: none"> <li>• Wounds ≤6 cm depth</li> <li>• Chronic wounds</li> <li>• Acute wounds</li> <li>• Traumatic wounds</li> <li>• Subacute and dehisced wounds</li> <li>• Open surgical wounds</li> <li>• Partial-thickness burns</li> <li>• Ulcers</li> <li>• Pressure injuries</li> <li>• Donor site wounds</li> <li>• Flaps</li> <li>• Grafts</li> </ul>

### Contraindications

- NPWT with all-in-one dressing was not recommended for (**Table 4**):
  - Patients unable to adhere to the treatment plan
  - Wounds with untreated osteomyelitis or eschar
  - When hemostasis has not been achieved
  - Areas where off-loading cannot be performed

**Table 4.** Contraindications

Contraindications
<ul style="list-style-type: none"> <li>• Exposed blood vessels, organs, or nerves</li> <li>• Anastomotic sites</li> <li>• Abscess</li> <li>• Untreated osteomyelitis</li> <li>• Untreated malignancy</li> <li>• Inadequate hemostasis</li> <li>• Presence of non-enteric and unexplored fistula</li> <li>• Presence of necrotic tissue with eschar</li> <li>• Wound depth &gt;6 cm</li> <li>• Undermining ≥2 cm</li> <li>• Tunneling</li> <li>• Wound area larger than large dressing size</li> <li>• Areas where off-loading cannot be achieved</li> </ul>

## Results (Cont'd)

### Recommended Therapy Parameters

- Panel members recommended a continuous negative pressure setting of -125 mmHg, with higher pressures for larger wounds or higher levels of exudate.
- Dressing changes were recommended every 5-7 days, with more frequent dressing changes for highly exudative wounds.

### Application Tips and Tricks

- Panel members recommended tips and tricks to help with (**Table 5**):
  - Pain or periwound skin irritation
  - Application over difficult anatomical areas
  - Temporary tissue deformation
  - Hyperhydration

**Table 5.** Tips for all-in-one dressing application and use

Potential Difficulty	Panel Recommendation
Patient reported pain or periwound skin irritation	<ul style="list-style-type: none"> <li>• Press dressing into place</li> <li>• Avoid stretching the drape during application</li> </ul>
Difficult anatomical area	<ul style="list-style-type: none"> <li>• Apply hydrocolloid dressings/rings to help maintain a negative pressure seal</li> </ul>
Temporary tissue deformation at site of negative pressure sensor	<ul style="list-style-type: none"> <li>• Apply the dressing so that the negative pressure sensor is not placed directly over the wound bed</li> </ul>
Wound edge hyperhydration	<ul style="list-style-type: none"> <li>• Gently wipe off moisture with dry gauze</li> <li>• Increase negative pressure</li> <li>• Increase dressing change frequency</li> </ul>

## Conclusions

- These recommendations provide initial use guidelines that can be adjusted as more clinical evidence becomes available.