

AMNIOTIC GRAFTS & ULCER CARE

A Patient's Easy Guide to Understanding Advanced Wound Healing Treatments

QUESTIONS ABOUT YOUR WOUND OR DRESSING?

(708) 237-9535

Our Specialized Wound Care Help Line is Open 24 Hours a Day, 7 Days a Week

What is a Pressure Wound or Ulcer?

A **pressure wound** (also known as a pressure ulcer or bedsore) is an injury that happens when constant squeezing or rubbing against a bed or chair cuts off the normal blood supply to your skin. Without blood flow, your skin and the deep tissues underneath can become damaged or die, creating an open sore.

These sores happen most often over bony areas of your body that handle your weight, such as your **tailbone, heels, hips, and ankles**. When these wounds become deep or slow to heal, our medical team uses advanced therapies like amniotic skin grafts to fix them.

What is an Amniotic Skin Graft?

An **amniotic skin graft** is an advanced medical treatment designed to jumpstart healing in deep or stubborn ulcers. Instead of cutting healthy skin from another part of your own body, doctors use a safe, sterilized biological membrane donated by healthy mothers following routine, scheduled Cesarean section births.

Think of it as a "**super-bandage**." When placed over your ulcer, it slowly blends into your skin layer. It contains natural tissue blocks and growth properties that tell your body's cells to wake up, lower harmful swelling, block out outside germs, and quickly build healthy new skin over the cavity.

Side Effects vs. Possible Failures

It is important to know the difference between normal changes your body goes through while accepting a graft, and signs that a graft might be failing to connect to your skin:

NORMAL SIDE EFFECTS

These are expected, safe reactions as your body heals:

- **Clear/Pink Fluid:** Seeing a small amount of thin, watery fluid on your outer bandage is totally normal during the first week.
- **Mild Pinkness:** The direct edges around the wound may look slightly pink or feel warm because fresh blood is rushing in to repair the area.
- **Tightness or Itching:** As new skin cells actively crawl across the graft layer to close the hole, the wound area can feel firm, tight, or intensely itchy.

WHY GRAFTS CAN FAIL

A graft fails when it can't stick to the wound base properly:

- **Fluid Trapping:** If natural fluids pool like a bubble underneath the thin graft, it lifts the membrane away and prevents it from sticking.
- **Sliding & Friction:** Any rubbing, slipping, or moving the body part can tear the fragile new connections. Keeping the site perfectly still is crucial.
- **Low Blood Circulation:** If the underlying tissue doesn't have good blood flow (often due to smoking or advanced diabetes), the graft won't get enough oxygen to survive.

Your Essential Home Care Rules

- 1. Do Not Disturb the Bandage:** Amniotic grafts are very thin and delicate. Never peel back, loosen, or check underneath the primary bandage unless your wound nurse explicitly instructs you to do so.
- 2. Keep Weight Completely Off the Wound:** If your ulcer is on your foot, heel, or tailbone, follow your offloading rules strictly. Use your specialized air mattresses, foam leg wedges, or protective healing boots at all times.
- 3. Call Us Instantly with Any Concerns:** You are never alone in your recovery. We keep a dedicated clinician on-call for you at all hours of the day and night.



EMERGENCY WARNING SIGNS — CALL OUR 24/7 LINE IMMEDIATELY

Call us immediately at (708)237-9535 if you notice any of these serious warning signs:

- The drainage on your bandage suddenly becomes thick, milky, bright yellow or green, or develops a bad, foul odor.
- The skin redness around your wound grows larger, spreads outward, or becomes intensely hot and painful.
- The graft inside the wound changes color, turning dark gray or black.
- You develop full-body chills, shivering, sudden confusion, or a fever over 101°F (38.3°C).

Instavaxx LLC Advanced Wound Care Solutions

Disclaimer: This patient education flyer is meant to guide your daily recovery. Always follow the specific, step-by-step clinical cleaning, wrapping, and physical positioning instructions provided directly by your Instavaxx doctor or home health nurse.