

OASIS® Wound Matrix

Case study: 5% TBSA partial thickness scald burns to LLE

Hana Lopez-Quinones MD, FACS

Director Burn ICU Jacobi Medical Center Bronx, NY

OASIS® Matrix

Case study: 5% TBSA partial thickness scald burns to LLE



Patient presentation

- 12 y/o male
- PMHx: none
- Presented to ED several hours after injury.

Burn presentation

• ~5% TBSA superficial second degree scald burn from hot water to LLE.

Management

- Silver-impregnated foam dressing for 2 weeks.
- Collagenase SANTYL[†] Ointment to ankle wound from PBD 14-28.
- OASIS Burn Matrix application on PBD 28.

Outcome

Fully healed on PBD 42.





PBD 1

OASIS® Matrix

SA

Case study: 5% TBSA partial thickness scald burns to LLE







PBD 14

PBD 21

PBD 28

OASIS® Matrix

SAN

Case study: 5% TBSA partial thickness scald burns to LLE



PBD 28: OASIS Matrix Application



Post-OASIS Matrix Application Day 7



Post-OASIS Matrix Application Day 14



5 Months Post-Burn



For detailed product information, including indications for use, contraindications, precautions and war please consult the product's applicable Instructions for Use (IFU) prior to use.

Important Safety Information

Indications: Collagenase SANTYL Ointment ("SANTYL") is a prescription-only medication indicated for debriding chronic dermal ulcers and severely burned areas. Contraindications: SANTYL is contraindicated in patients who have shown local or systemic hypersensitivity to collagenase. Warnings and Precautions: The optimal pH range of collagenase is 6 to 8. Higher or lower pH conditions will decrease the enzyme's activity and appropriate precautions should be taken. The enzymatic activity is also adversely affected by certain detergents, and heavy metal ions such as mercury and silver which are used in some antiseptics. As such, the wound should be properly cleansed prior to application of SANTYL. Debilitated patients should be closely monitored for systemic bacterial infections because of the theoretical possibility that debriding enzymes may increase the risk of bacteremia. A slight transient erythema has been noted occasionally in the surrounding tissue, particularly when SANTYL was not confined to the wound. SANTYL is not indicated for wound closure. Discontinue use of SANTYL after granulation tissue is well-established. Adverse Reactions: No allergic sensitivity or toxic reactions have been noted in clinical use when used as directed. The risk information provided herein is not comprehensive. For complete prescribing information, please refer to the accompanying PI or visit: https://santyl.com/sites/default/files/2019-12/SANTYL-PI.pdf. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit MedWatch or call 1-800-FDA-1088.

Advanced Wound Management Smith & Nephew Fort Worth, TX 76109 USA

T 727 392-1261 F 727 392-6914 ♦Trademark of Smith+Nephew. OASIS is a trademark of Cook Biotech Incorporated ©2023 Smith+Nephew. All rights reserved.

All trademarks acknowledged

OMCE19-38472-0823