

# Treating lower limb wounds with medi compression following the NWCSP

medi

If time constraints prevent ABPI – gentle compression may be applied until ABPI is taken – as long as red flags are excluded

- Spreading Infection/Systemic Infection
- Limb threatening ischaemia
- Suspected skin cancer
- Confirmed Diabetic foot ulcer
- Red, hot, swollen leg/cellulitis
- Suspected DVT
- Bleeding varicose veins
- Confirmed arterial disease/PAD

**Good limb shape  
low exudate/oedema**



**20**

Mild compression  
mediven® ulcer kit  
white ulcer stocking only  
OR  
juxtalite® / juxtafit®  
apply 20mmHg

**Distorted leg shape or low/  
moderate oedema/exudate**



**Once ABPI detailed and the  
result is safe for compression...**

**40**

Full compression  
mediven® ulcer kit use both  
white ulcer stockings plus  
outer sock = 40mmHg  
OR  
juxtalite® / juxtafit®  
apply 40mmHg



Note – Following assessment, use Sirona lower limb guidance on recommended compression levels