

# Application and Removal



## 3M™ Coban™ 2 Layer Compression System

is a compression bandage system used to achieve sustained therapeutic compression for the treatment of venous leg ulcers and related conditions, **with ABPI equal to or greater than 0.8.**

## 3M™ Coban™ 2 Layer Lite Compression System

has been designed to achieve sustained, therapeutic compression with reduced sub-bandage resting pressures.

For the management of mixed aetiology leg ulcers, lymphoedema and venous leg ulcers where patients cannot tolerate full compression or where full compression is otherwise inappropriate. It can be used for patients **with an ABPI greater than or equal to 0.5.**

### General Instructions

- Follow local protocol and guidelines for infection control.
- Apply Coban 2 layer compression system and Coban 2 layer lite compression system with the foot in a dorsiflexed position (foot at a 90 degree angle).
- The Coban 2 layer compression system and Coban 2 layer lite compression system can be removed with bandage scissors or by unwrapping.

### Layer 1: The Inner Comfort Layer The 'Cut' Technique



Apply this layer with the foam side against the skin, using just enough tension to conform to the shape of the leg with minimal overlap. This ensures a thin application that promotes patient comfort and joint articulation. Start the application with a circular winding at the base of the toes, beginning at the first or the fifth metatarsal head (**fig 1**)



The second circle of winding should come across the top of the foot so that the middle of the bandage width approximately covers the articulating aspect of the ankle joint. For a longer foot an extra turn of the bandage may be necessary before taking the bandage behind the ankle (**fig 2**)



Bring the bandage back over the dorsum of the foot, overlapping the comfort layer already in situ. Cut the comfort layer and then mould around the ankle and foot. Tape may be used to secure (**fig 3**)



Apply next turn of bandage overlapping the previous winding and continue in a spiral fashion up the leg, with minimum overlap (**fig 4**)



Depending on the shape of the limb, should the bandage fail to overlap and skin become visible, cut the bandage (**fig 5**)



Overlap and reposition the bandage so that minimum overlap is achieved again and continue in a spiral fashion up the leg. NB. This can be done more than once depending on shape of leg (**fig 6**)



Proceed up to 'two fingers width' below the back of the knee (**fig 7**) Cut off excess material

### Additional Layer 1: The Inner Comfort Layer Reshaping Limbs



Follow points **1 to 7** as detailed under the 'cut' technique, in the left column



#### The 'inverted champagne bottle' shaped leg

The comfort layer may be used to 'normalise' the leg shape. It can be applied by winding lengths of comfort layer around the leg in the areas that require extra padding (**fig 9**)  
NB: It is as easy to reshape the limb with additional comfort layer, as it is with orthopaedic wool



#### For dysmorphic limbs that have 'hollowed' areas (either medial or lateral)

A comfort layer filler may be applied to these areas. The filler can be made by cutting a short length of comfort layer and folding length wise (**fig 10**) This can then be applied to the 'hollowed' areas on the leg, in order to 'normalise' the shape. NB: Tape may be used to secure in place

#### Hints and tips:

For very mobile patients additional comfort layer and/or compression layer can be cut and applied to reinforce the heel (**figs 11 and 12**)



For patients with prominent tibial crest, a strip of extra comfort layer can be applied to this area (**figs 13 and 14**)

Note: small slits cut in the side of the strip aid conformability. Tape may be used to secure in place.



The 3M Coban 2 layer compression system comfort layer may be purchased as an individual product, to avoid the extra costs and waste associated with opening a new 2 layer compression system kit (containing both a comfort roll and compression roll) when needing to address issues highlighted above.

### Layer 2: The Outer Compression Layer Standard Application



The outer compression layer is designed to be applied at full stretch. It is recommended that you hold the roll close to the foot and limb throughout the application for controlled, even compression. Start the application with a circular winding at the base of the toes, beginning at the first or fifth metatarsal head (**fig 15**)



For a longer foot an extra turn of the bandage may be necessary before taking the bandage behind the heel. Take the bandage behind the heel (**fig 16**)



Continue over the top of the foot



Bring the bandage under the heel. This figure-of-eight motion is called the ankle lock (**fig 18**)



Proceed up the leg with 50% overlap to cover the entire inner comfort layer. Maintain 100% stretch throughout the bandaging process (**fig 19**)



Cut off excess material (**fig 20**)



Following the application, press lightly on the entire surface of the application to guarantee an optimal conformability and to ensure that the bandage adheres to itself and to the inner comfort layer (**fig 21**).

Tape may be used to secure bandage, if required