

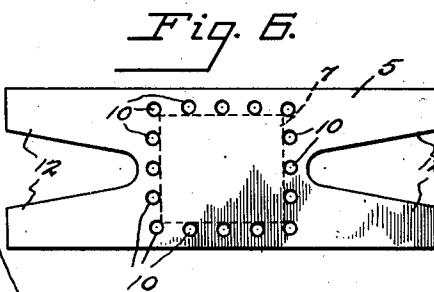
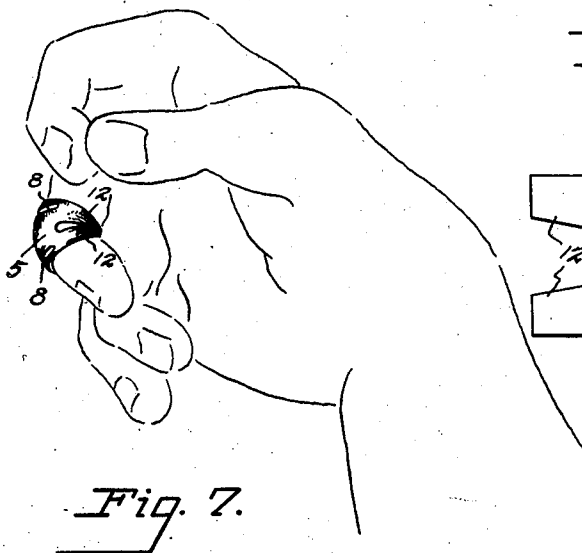
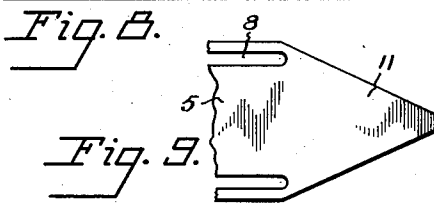
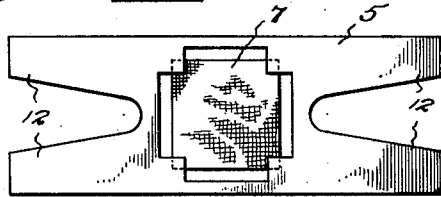
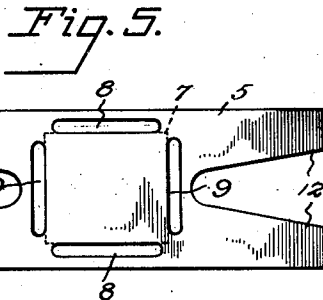
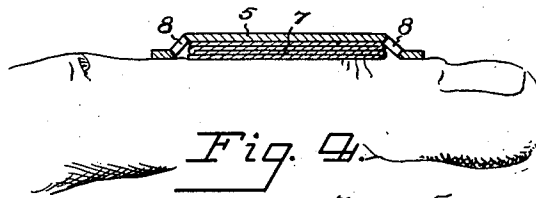
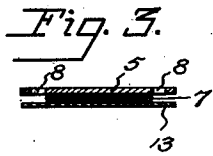
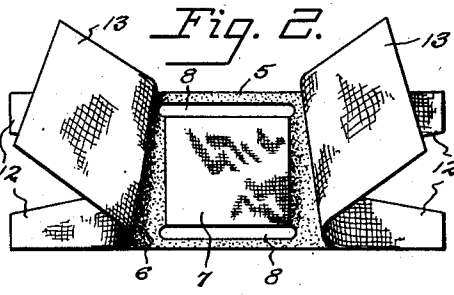
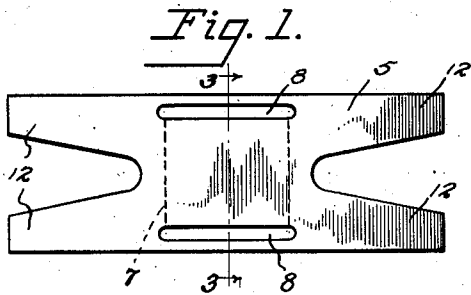
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2,054,768

FIRST AID DRESSING

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FIRST-AID DRESSING

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2 Claims. (Cl. 128—268)

My invention relates to first-aid dressings of the type embodying a sterile pad and a carrying strip of adhesive plaster, an apt example being the band dressing disclosed in Letters Patent No. 1,612,267.

Heretofore, and before my invention, the plaster or other carrying member has been provided with one or more openings for ventilating purposes or for the purpose of applying medication. These proposals take no account of the pad which, while air permeable at the time of its application, soon becomes sodden and compacted due to the nature of the medicament or to discharge from the wound, either or both. Under such conditions air cannot pass through the pad and, hence, its continued use is hazardous since medical authorities all agree that free access of air is necessary or desirable to avoid sweating and other conditions inimical to healing.

My invention was devised chiefly for the purpose of obviating the objectionable and disadvantageous condition stated and provides a first-aid dressing which will pass the severest test and scrutiny respecting ability or capacity at all times during the period of its application to insure free and unobstructed passage of air to and from the wound and without sacrificing or impairing in any degree the usual means of safeguarding the open wound, abrasion, bruise or other affected part. And, in the advancement of said purpose, means are provided for the free and untrammelled circulation of air in and about the wound and essentially along lanes provided beyond the pad limits in the plane of the pad or its laminations.

The nature, characteristic features and scope of the invention more readily will be understood from the following detailed description, taken in connection with the accompanying drawing, forming a part hereof, wherein

Figure 1 is a plan view of the dressing as it appears in back.

Fig. 2 is a plan view as it appears in front.

Fig. 3 is a section on line 3—3 of Fig. 1.

Fig. 4 is a sectional view showing the dressing in applied position.

Figs. 5 and 6 are plan views of modifications.

Fig. 7 is a perspective view showing the application of the dressing to a part susceptible to flexing and the coordinate disposition of the tabs.

Figs. 8 and 9 are plan views of other modifications.

In the drawing, 5 represents a strip or band of fabric which may be regular surgical plaster or any appropriate cloth or paper having a facial area coated with normally tacky adhesive 6.

Strip 5 may or may not be of such nature or character as to be impermeable to fluids and substantially indestructible in the presence of reagents. By preference, however, it is a fabric having an impregnation of a heat-hardenable phenolic resinoid material which, without impairing the inherent flexible qualities of the fabric, makes it impermeable to fluids so that the injured hand or other part to which it is applied may be washed again and again without the hazard of the plaster becoming stripped from the wound.

The plaster 5 is a carrying member for a pad 7 which may be any absorbent material having the necessary properties of softness and sterility to enable it properly to shield a minor cut or other injury. An instance of such material is a strip or strips of soft surgical gauze in manifold order of arrangement and arranged on the carrying strip so as to be bounded marginally by exposed areas of the adhesive mass whereby any loose threads or ravelings will be anchored in the mass. In any event, the cut or frayed edges of the gauze fabric range crosswise of the plaster strip and those margins that are parallel with the longitudinal edges of the strip have smooth finished or selvage edges.

Heretofore it has been the practice to provide one or more openings in the carrying strip or plaster just above the padded portion for medicating purposes and also on the theory that they would serve to ventilate the affected area. As stated at the outset, such practice is wholly inoperative and of no effect so far as ventilation is concerned because, due to medication and to the wound discharge, either or both, the pad is no longer permeable to air. Hence, I depart from the conventional practice and, placing no dependence on supplying fresh air to the affected part, via the pad, I provide for free and unobstructed passage of air along lanes beyond the lateral limits of the pad. In the advancement of this part of my invention I locate the openings in the carrying strip 5 so that they flank the edges of the pad. For example, there are longitudinally ranging slits 8 intermediate the pad and the side margins of the plaster, the distance between the slits substantially defining the crosswise dimension of the pad so that free and unobstructed circulation of air is at all times insured. The effect of the slits 8 is to float the padded area with respect to the marginal anchoring portions of the plaster. Thus, when the plaster is applied to a part said anchoring strips occupy a relatively low flat plane and leave the lateral portion

or edge of the pad exposed to free access of air as clearly shown in Fig. 4.

In the modification, Fig. 5, there is shown an additional pair of slits 9 ranging crosswise the plaster and formed in similar relation. Or, as in the modification, Fig. 6, there may be a continuous series of perforations 10 immediately adjacent or contacting the lateral limits of the pad. The merit of either of said alternative provisions is to insure free passage of air and to eliminate factors making for sweating, congestion and other conditions that interfere with healing processes.

Carrying strip 5 may be cut to conventional form but, by preference and in continuation of my inventive thought, it is formed with flared ends 11 or with spaced apart end terminals or arms 12, either of which alternative, when present, is useful as, for example, in applying the dressing to an injured digit or other part which voluntarily or otherwise is subject to flexing which would be hampered by plaster strip of uniform area throughout. And, it may here be remarked that this form-fitting of the dressing to suit the nature of the particular case is helped along by the slits

bounding the marginal limits of the pad in their coordinate office of relieving surface or body tension.

If desired, and as preferred, the pad and the surrounding adhesive mass, are masked, until required for service, by the usual crinoline or other facing fabric indicated at 13.

Having described the invention, I claim:—

1. A first-aid bandage comprising a porous pad and an imperforate water-repellent backing having anchoring provisions extending beyond the pad, the backing having continuous openings immediately flanking the side walls of the pad and ranging substantially the full length and depth thereof whereby substantially the entire perimeter of the pad is exposed to permit free and unobstructed flow of air through the body of the pad in a plane parallel with that of the imperforate backing.

2. The article of the preceding claim in which the anchoring provisions include forked extensions which admit of overlapping without interfering with the venting of the pad.

GEORGE ELLSWORTH GALE, JR.