

# 3M™ Transpore™ White Dressing Tape

## Commonly Asked Questions

**Question:**

Is 3M™ Transpore™ White Surgical Tape hypoallergenic & natural rubber latex free?

**Answer:**

Yes.

**Question:**

Is Transpore White a paper tape?

**Answer:**

Not exactly. Even many “paper” tapes are not made of paper. For example, the backing of 3M™ Micropore™ Surgical Tape is really spun rayon. The backing of Transpore White tape is a blend of rayon and polyester fibers. Transpore White tape is breathable like a paper tape, yet it has greater strength because of the polyester fibers.

**Question:**

Why another surgical tape?

**Answer:**

Transpore White tape combines the most requested characteristics of two popular 3M™ surgical tapes, Micropore and Transpore tape: It is a gentle, breathable tape with easy, bi-directional tear and good adhesion to both damp and dry skin.

**Question:**

Why do you call Transpore White a “dressing tape”?

**Answer:**

We originally thought that Transpore White tape would be primarily used for dressings. However, clinicians have found this tape is very versatile, and it is just as popular for securing tubing as it is for securing dressings.

**Question:**

How can Transpore White tape have high adhesion and yet be gentle?

**Answer:**

Gentleness is related to the ease of removing tape. Transpore White tape has a special adhesive that adheres securely and yet releases well when desired. It is also breathable, permitting skin to function in a more normal manner.

**Question:**

What types of clinicians use Transpore White tape?

**Answer:**

Transpore White tape is used in many ways:

- Transpore White tape as a specialty tape: particularly in pediatrics & intensive care units
- Transpore White tape as an all-purpose, standardization tape: when the goal is to reduce costs by buying fewer types of tapes, Transpore White tape is often coupled with a soft cloth tape (3M™ Medipore™ or 3M™ Medipore™ H Tape) for acute care and extended care facilities. One or two “specialty” tape(s) (such as Cloth Adhesive Tape for the Intensive Care Units or 3M™ Microfoam™ Tape for the Cardiovascular Lab) are used to supplement these standard tapes for special secural needs.

**Question:**

Clear 3M™ Transpore™ Surgical Tape is often used by I.V. teams because it is so easy to tear and customize the width for chevroning around the catheter hub. Will I.V. nurses like Transpore White tape?

**Answer:**

Yes. Some I.V. teams continue to use clear Transpore tape. Other teams report that Transpore White tape is working great.

**Question:**

How does Transpore White dressing tape compare to Micropore tape?

**Answer:**

Transpore White tape has higher initial and longer term adhesion to dry skin and slightly lower adhesion to damp skin than Micropore tape. Although Transpore White tape is a gentle tape, Micropore tape may be slightly more gentle if applied to dry skin.

**Question:**

How does Transpore White dressing tape compare to the original Transpore tape?

**Answer:**

Transpore White tape has slightly higher initial adhesion to both dry and damp skin and higher long-term adhesion. Transpore White tape is generally a more gentle tape with less adhesive residue, but Transpore tape has the advantage of being transparent and slightly easier to tear.

**Question:**

Is Transpore White tape sterile? Can it be sterilized?

**Answer:**

3M Surgical tapes are sold clean, not sterile.

Transpore White tape may be sterilized by ethylene oxide but NOT by steam (autoclave). Although 3M provides these guidelines, it is up to the facility to ensure sterility. Sterrad™ processing with hydrogen peroxide is not recommended for Transpore White tape because the rayon fibers in the tape will inactivate the hydrogen peroxide.

**Question:**

Why do we have an expiration date for tapes? What happens when a tape “expires”?

**Answer:**

Although an expiration date is not required for surgical tapes in the U.S., an expiration date is required by a number of other countries. You might think of it as a “best quality if used by...”. In general, we do not expect changes in performance shortly after the expiration date, but 3M ensures performance within that time frame. The recommended shelf life for Transpore White dressing tape is 3 years under normal storage conditions.

**General Taping****Question:**

Is there anything more to know than “sticky side down”?

**Answer:**

Yes, after choosing the appropriate tape, place the tape without tension onto the skin. In general, do not encircle a limb completely with tape since subsequent swelling or an infiltration may compromise circulation. The adhesives on the surgical tapes are “pressure sensitive”. This means that they are designed to adhere best when gentle, but firm, finger or hand pressure is applied to the tape, rubbing it into place. Skin has hills and valleys. Just laying a piece of tape on the skin only gives you contact with the top of the hills. Gentle, but firm strokes along the tape allows the adhesive to come into contact with more of the skin surface. This will increase initial adhesion and decrease the risk of “rolling” or losing your tape to friction. Usually, the tackier - or stickier - the tape, the less pressure is needed.

**Question:**

How can I increase tape adhesion?

**Answer:**

**The key concepts to maximize adhesion are:**

- Start with clean, dry skin
- Touch the sticky surface of the tape as little as possible
- Apply sufficient pressure to the tape to get the adhesive into the nooks and crannies of the skin
- Cover adequate surface area so that the tape can support the tubing or dressing
- Obtain full contact between the tape and the skin or tubing so that moisture cannot slip between the two and loosen the tape

Most adhesives stick best to clean, dry surfaces so try to minimize moist conditions as much as possible.

- Remove substances that contain emollients or oils, such as most moisturizers and adhesive tape removers.
- If the skin is very oily, use a mild soap and water to remove the excess oil and pat dry. An alcohol wipe may also be used to remove the excess oil, but since it is very drying, it should be used with care
- To protect at-risk skin, 3M™ Cavilon™ No Sting Barrier Film may be used under the tape.
- If you are using a prep solution, let it dry completely before applying the tape.

**Question:**

How can I get tape to let go of my gloves?

**Answer:**

We tend to hold tape tightly, especially when tearing it off the roll and when gauging where we plan to put the tape. Because the tapes have pressure sensitive adhesives, when we hold them tightly, they stick even more to our gloves. But, the adhesives were designed to release from gloves, so try holding the tape a little less tightly, and it will usually “let go”.

**Question:**

What is the best way to remove tape?

**Answer:**

Proper tape removal is critical in reducing the occurrence of traumatic skin injuries such as skin stripping. First, loosen the edges of the tape. You may “start” an edge of the tape by pressing a small piece of tape onto the corner, like a pop tab, and lifting – pressure sensitive adhesive! Stabilize the skin with one finger. Remove the tape “low and slow” in the direction of hair growth. Keep the tape close to the skin surface and pulled back over itself. Removing tape at an angle will increase tension on the epidermis and increase the risk of mechanical trauma. As the tape is removed, continue to support the newly exposed skin. Support close to the “peel edge” is particularly important for thin or easily distensible skin.

For tape that is strongly adhered to skin or hair, you may consider using a medical grade adhesive remover or moisturizer to soften the adhesive. 3M tape adhesives are not readily dissolved in alcohol.

Hair presents special challenges. It can be difficult to obtain good initial adhesion over hair and yet, difficult to remove tape from hair after a time. Hair tends to grow medial to lateral, sometimes downward. A technique that may be helpful in removing tape from hair is to catch the upper, medial edge of the tape. Peel the edge of the tape back, forming a small triangle. Supporting the skin adjacent to the tape, glide a small amount of moisturizer on the leading (peel) edge of the tape. This is often enough to soften the adhesive and release it from hair. Continue to remove the tape “low and slow, back over itself” while gliding the moisturizer along the edge.

**Question:**

What if I used a moisturizer (cream) or an adhesive remover and need to tape over the same area?

**Answer:**

Reassess the skin. If you wish to retape over an area where you used adhesive remover or moisturizer, you will either need to remove the moisturizer or adhesive remover or use a moisturizer that allows you to tape over it. Some moisturizers (creams) that allow you to retape may actually increase adhesion of some tapes on some people, so it is important to use good technique for subsequent tape removal. You may wish to protect areas that will be exposed to repeated taping with an alcohol-free barrier film such as Cavilon No Sting Barrier Film. Removing the tape will also remove the barrier film, so the film should be reapplied and allowed to dry between tapings.

**Question:**

Where can I find the expiration date?

**Answer:**

The expiration date is embossed on the end of the tape box following the hourglass symbol. At this time, the lot number and expiration date cannot be printed inside the rolls because of limitations in space and printers.

**Question:**

Are Material Safety Data Sheets (MSDSs) required for surgical tapes?

**Answer:**

No. By definition, surgical tapes are “articles”, so MSDSs are not required.



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