May 27, 1941. H. E. HOLLANDER ET AL 2,243,422

FINGER BANDAGING UNIT

Filed May 11, 1938

Fig. 2

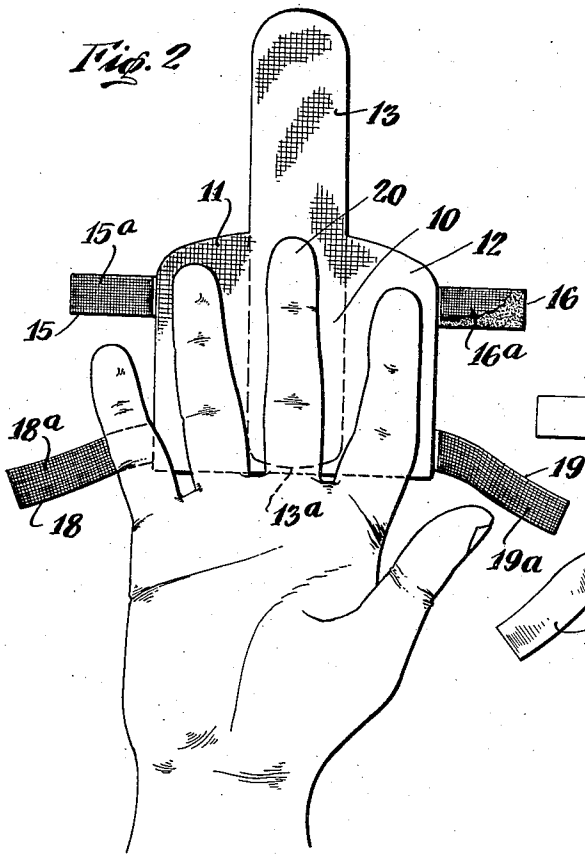


Fig. 1

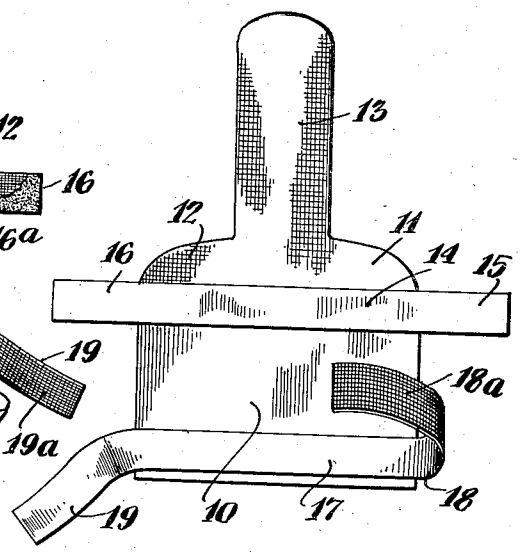


Fig. 3

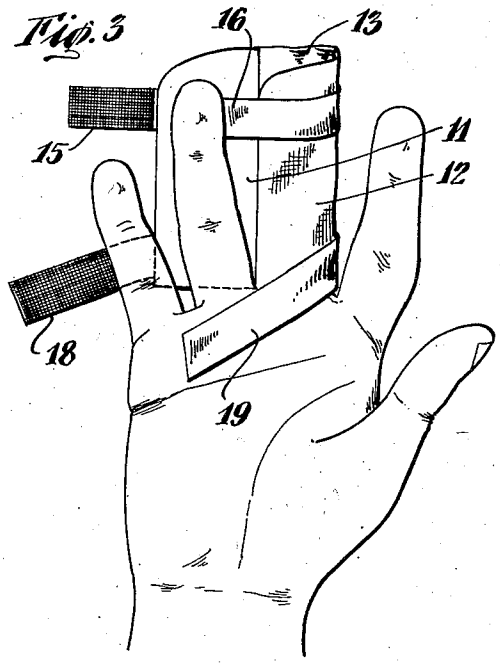
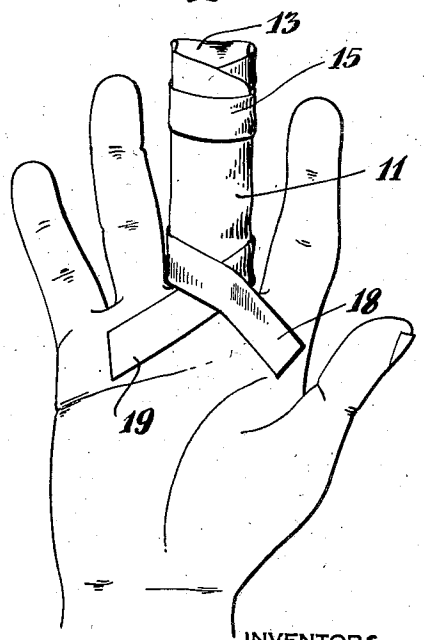


Fig. 4



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FINGER BANDAGING UNIT

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5 Claims. (Cl. 128—165)

This invention relates to finger bandaging means and more particularly to a unitary structure arranged to afford a surgical bandage for a finger. An important object of the invention is to provide an improved bandaging device of the stated character, which is not only of a simple and inexpensive construction, but is adapted to be applied readily and expeditiously by physicians, nurses or others, or even by the wearer himself. Experience, for example, has demonstrated that to bandage a finger with ordinary gauze tape is always a difficult and often an unsatisfactory task. It is not only hard to wind the gauze effectively and securely around the finger, but trouble is almost invariably encountered in holding the bandage in place, particularly without the use of a cumbersome, ventilation-impairing and often painful cot or sheath. In recent years, moreover, these difficulties have been enhanced with the improvement in the softness and quality of gauze generally available on the market. That is, although the softer grades of gauze are more comfortable and are preferable from a surgical or medical standpoint, they are even more difficult to use and keep in place on a finger, than the somewhat less soft varieties customarily employed some years ago.

Further objects of the invention are not only to overcome the difficulties just explained, but also to provide a finger bandaging unit which will completely and effectively bandage an entire finger; likewise to provide such a unit which includes cooperating securing means that may be readily applied by the user to keep the bandage in wrapped relation about the finger and to hold it in place on the finger; and further to provide a finger bandaging unit satisfactorily adapted for manufacture and sale with its bandaging surface impregnated with any one of a number of medicating compositions.

Other objects and advantages include those which are hereinafter stated or apparent or which are incidental to the invention, the nature of the latter being conveniently explained by reference to the following description and accompanying drawing of a presently preferred embodiment, set forth by way of example.

In the drawing—

Fig. 1 shows a plan view of the rear face of the unit;

Fig. 2 shows the opposite face of the unit as the latter is about to be applied to bandage a finger;

Fig. 3 shows an intermediate stage in the application of the bandage to a finger; and

Fig. 4 shows the unit applied and retained in wrapped relation on a finger.

Referring particularly to Figs. 1 and 2, the unit includes a flat member of soft, permeable fabric, which conveniently comprises a laminated gauze pad, for example consisting of six or seven layers of surgical gauze. This member or pad has a substantially rectangular body part which may consist of a central or backing portion **10** and adjacent side portions **11**, **12**; the upper corner edges of the latter being conveniently rounded, as shown, to avoid bunching when wrapped in the manner hereinafter described. Preferably integral with the pad, and extending from an edge of its rectangular body part—for instance, from an end of the center portion **10**—an elongated tab **13**, of the same bandaging fabric, is provided. Adhesive securing means are carried by the rear surface of the pad, and may advantageously comprise an upper strip of adhesive tape **14** having free ends **15**, **16**, respectively, extending beyond the side portions **11** and **12** near the top edge of the body part; and also a lower strip of adhesive tape **17**, having free ends **18**, **19**, respectively extending beyond the side portions **11**, **12** near the bottom of the pad.

To facilitate packaging, and also handling, both by manufacturer and user, the exposed adhesive surfaces of the free ends of the adhesive tapes **15**, **16**, **18** and **19**, may be covered with protective strips of stiffened gauze or other readily removable stiff fabric. Such strips are shown respectively at **15***a*, **18***a*, and **19***a*, in Fig. 2, and partly cut away at **16***a* to reveal the underlying adhesive surface of tape **16**. It will be understood that these supplementary covering or protective strips may be easily pulled off by the user when the adhesive is actually to be fastened in place.

The pad itself, or particularly the inner or front face thereof (partly exposed in Fig. 2), may be impregnated with any suitable medicating composition, such as an antiseptic composition or compositions specially designed for the treatment of various injuries or conditions requiring medication. Among others, the following are noted as examples of such compositions, any one of which may be satisfactorily preimpregnated in the unit during manufacture, so that the subsequently bandaged finger will be benefited in accordance with the recognized properties of the composition:

Tannic acid powder
Epsom salts
Sodium bicarbonate
Boric acid
Mercurochrome

A convenient manner of applying the unit is shown in Figs. 2 to 4 inclusive. Referring first to Fig. 2, the finger **20** to be bandaged is first placed along the center portion **10** of the pad. The tab **13** is then folded down over the end of the finger and along the opposite side of the latter so as to occupy the position indicated in

dotted lines 13*a*. Thereafter, one of the side portions, such as the portion 12, is wrapped around the finger, over the down-folded tab, so that the parts assume the positions shown in Fig. 3. At this time, the upper free end of adhesive tape 16 can be pulled over and pressed into holding relation with the inner surface of the unwrapped side portion 11; this effectively holds the upper part of side portion 12 in place for the further wrapping, to be described. At the same time, the lower free tab of adhesive 19 can be brought down and pressed into securing engagement with an adjacent part of the hand, for example, the upper part of the palm. The other side portion 11 is next wrapped around and over the portion 12, as shown in Fig. 4, and the remaining upper strip of adhesive tape 15 is drawn snugly around and into engagement with the outer surface of the wrapped bandage, so as to hold the unit in wrapped relation near the end of the finger. At the bottom of the bandage the other remaining adhesive tab 18 is pressed into attachment with an adjacent part of the hand, such as the palm, as shown; and the entire unit is now firmly wrapped in bandaging relation about the entire finger and there securely fastened in place, as illustrated in Fig. 4.

It will thus be seen that the unit affords an especially effective and convenient arrangement for bandaging a finger, avoiding cumbersome and unwieldy wrappings of gauze tape, and admirably satisfying the objects of the invention as hereinabove set forth. It is particularly noteworthy that the unit may, if desired, be applied by the wearer himself, using only his free hand—in contrast to the well-known impracticability of trying to bandage a finger with ordinary gauze tape, using only one hand. The unit, moreover, is such that it can be easily manufactured and sold in large quantities, and it is attractive to medical persons and laymen alike. The manufactured unit can, of course, be sterilized by the maker, and easily packaged to keep its sterilized condition until use; and it will also be understood that it may be made in a number of standard sizes, to fit all sizes of fingers (including thumbs).

Because of the ease with which the bandage may be applied and removed, it can be replaced as often as necessary for the most exacting medical requirements. Furthermore, under ordinary circumstances, there is no need for any supplementary cot or sheath as is ordinarily required to hold a finger bandage in place; indeed there will usually be no occasion to employ such a device to keep the outer surface of the bandage neat and clean, since the unit may be so readily replaced with a fresh one.

It will be appreciated that the number and arrangement of the adhesive tabs may be varied to suit particular requirements. For example, in many cases and often preferably, one of the upper tabs may be omitted and the side of the bandage lacking an adhesive tab is then first wrapped in over the gauze tab 10. The adhesive tab on the subsequently wrapped side will serve satisfactorily to hold the bandage in wrapped relation at the top (the arrangement and wrapping being the same as in the drawing except that one tab, e. g., tab 18, is omitted), and the omission of the inner wrapped adhesive tab avoids bulkiness within the bandage.

It will be generally understood that the invention is not limited to the specific embodiments herein shown and described, but may be carried out in other forms without departure from its spirit as defined by the following claims.

We claim:

1. A finger bandaging unit comprising a gauze pad having a substantially rectangular body and a tab portion extending from one edge thereof, whereby the pad may be wrapped around the finger with the tab portion passing over the end of the finger and retained beneath overlapped side edges of the body, and adhesive-surfaced securing means carried by said pad and having a plurality of spaced free ends to be secured respectively to the surface of the pad and to an adjacent part of the hand, for holding the unit in wrapped relation on the finger.

2. A finger bandaging unit comprising wrapping means of permeable fabric having a body member to be wrapped around a finger with its side ends in overlapped relation, and a tab member extending from the top of the body portion and adapted to be passed over the end of the finger and retained beneath the overlapped side ends of the body member, and securing means carried by the wrapping means and including adhesive means to be attached by the user, for holding the member in wrapped relation on the finger.

3. A finger bandaging unit comprising a flat member of soft fabric having portions respectively defined for wrapping over the end and about the sides of a finger, and securing means carried by said member and including adhesive means to be attached by the user, for holding the member in wrapped relation on the finger.

4. A finger bandaging unit comprising a flat member of soft permeable fabric comprising a back portion, an elongated tab extending from one end of the back portion, and side wrapping portions extending from the sides of the back portion, and securing means including a pair of adhesive tapes having free ends for attachment by the user, and carried by the first mentioned member with the free ends respectively extending from the edge of a side portion in spaced relation.

5. A finger bandaging unit comprising a single continuous flat member of laminated soft absorbent fabric, having a body portion to be wrapped around a finger with its side ends in overlapped relation, and a tab portion which extends integrally from the top edge of the body portion and which is adapted to be passed over the end and along the side of the finger and retained along the latter beneath the wrapped body portion, said member having its finger-abutting surface impregnated with a medicating composition, and securing means carried by said member and including free portions of adhesive tape respectively extending from each side end of the body portion and respectively near the top and bottom edges of the latter, whereby the tape portions near said top edge may be affixed to the surface of the member to hold the upper part of the same in wrapped relation, and the tape portions near said bottom edge may be affixed to the hand to hold the member in wrapped relation at its lower part and on the finger.

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