



Incontinence
Solutions



**Know How.
Product Selection
and Application.**

Documents and forms provided here are available through the online Continence Management Program. Enrolled members, please log on to print forms, access tools and view additional educational courses and materials.



Resident Data Form

Floor/Wing:-

Date: _____



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Clinical Decision Tree for Disposable Incontinence Products

Considerations	0 ALWAYS CONTINENT	1 OCCASIONALLY INCONTINENT Less than 7 episodes of incontinence or 1 episode of bowel incontinence	2 FREQUENTLY INCONTINENT 7 or more episodes of urinary incontinence or 2 or more episodes of bowel incontinence, but at least 1 episode of continent voiding or bowel movement	3 ALWAYS INCONTINENT No episodes of continent voiding or continent bowel movements	4 NOT RATED Resident had a catheter (indwelling, condom), urinary ostomy, or no urine output or bowel movement for the entire 7 days

M0150—Is this resident at risk of developing pressure ulcers? No = 0

Ambulatory	N/A	Bladder Control Pads Pull-Ups	Pull-Ups Incontinent Liners	Incontinent Liners Adult Briefs	N/A
Limited Mobility		Incontinent Liners Bladder Control Pads	Incontinent Liners		
Diarrhea		Incontinent Liners	Incontinent Liners Adult Briefs		
Non-ambulatory/ Contractions					

M0150—Is this resident at risk of developing pressure ulcers? Yes = 1

Ambulatory	N/A	Bladder Control Pads Pull-Ups	Pull-Ups Incontinent Liners	Incontinent Liners DryPads Briefs	N/A
Limited Mobility		Bladder Control Pads Incontinent Liners	Incontinent Liners		
Diarrhea		Incontinent Liners	Incontinent Liners Briefs		
Non ambulatory/ Contractions					

*Guidelines from the Centers for Medicare & Medicaid Services and CMS TAG F315

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Medication Chart

ACE inhibitors	Stress	Can cause cough and increase stress incontinence	Elanapril, Catapril
Acetylcholine-like agents	Urge	Urinary retention	Rivastigmine, Tacrine
Alcohol	Transient	Sedative, diuretic effects	Beer, wine, liquor
Alpha adrenergic blockers	Stress	Produce relaxation of smooth muscle in the bladder neck and urethra	Prazosin, Terazosin
Alpha stimulants	Overflow (urinary retention)	Increase smooth muscle tone in proximal urethra and bladder neck	Pseudoephedrine, Ephedrine
Anticholinergic drugs	Overflow (urinary retention)	Interferes with bladder contraction; may cause urinary retention	Benztropine, Dicyclomine, Disopyramide, Tiotropium
Antidepressants	Overflow (urinary retention)	Some have significant anticholinergic effect which can interfere with bladder contraction	Amoxapine, Amitriptyline, Clomipramine, Desipramine, Doxepin, Imipramine, Protriptyline, Paroxetine
Antidiarrheal	Transient	Anticholinergic effect which can interfere with bladder contraction	Diphenoxylate, Atropine
Antiemetics	Overflow (urinary retention)	Constipation, anticholinergic effect which can interfere with bladder contraction	Prochlorperazine, Promethazine
Antihistamines (H-1 blockers)	Overflow (urinary retention)	Smooth muscle relaxation, incomplete bladder emptying	Chlopheniramine, Cyproheptadine, Diphenhydramine, Hydroxyzine
	Transient, Functional	Sedation, immobility, sedation, urinary retention	
Antipsychotics	Urge, Overflow	Rigidity, immobility, sedation, urinary retention	Chlorpromazine, Clozapine, Olanzapine, Thioridazine
Antispasmodics	Overflow (urinary retention)	Anticholinergic effect which can interfere with bladder contraction	Belladonna, Clidinium, Chlordiazepoxide, Dicyclomine, Hyoscymine, Propantheline
Antivertigo	Overflow (urinary retention)	Sedation, anticholinergic effect which can interfere with bladder contraction	Meclizine, Scopolamine
Caffeine	Transient	Diuresis—increases urine production	Coffee, tea, soda
	Urge	Bladder irritant	

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Calcium channel blockers	Overflow	Relaxes detrusor (bladder) muscle relaxation	Nifedipine, Nicardipine, Isradipine, Felodipine, Nimodipine
	Nocturia enuresis	Increases urine production at night	
	Urge	May cause constipation which may cause outflow obstruction or increased bladder contractility	
Cardiovascular	Overflow (urinary retention)	Anticholinergic effect which can interfere with bladder contraction	Furosemide, Digoxin, Nifedipine, Disopyramide
Diuretics	Urge, Nocturia enuresis	Increases urine production	Furosemide, Bumetanide
Muscle relaxants—central acting	Stress, Overflow	Sedation, decrease bladder contractility and sphincter resistance	Orphenadrine, Baclofen
Muscle relaxants—direct-acting skeletal	Stress	Decrease sphincter control and resistance	Chlorzoxazone, Metaxalone, Methocabamol
Narcotics	Nocturnal enuresis, Transient	Decreases ability to awaken to sensation of a "full bladder" (sedation)	Opiates, Morphine, Codeine, Oxycodone
	Overflow	Decreased mobility, constipation, urinary retention	
	Urge	Causes detrus or (bladder) instability	
Nicotine	Stress	Bladder instability related to "smoker's cough"	Cigarettes
Parkinson's	Stress, Overflow	Urinary frequency, urinary retention, lax sphincter, confusion	Amantadine, Benztropine, Biperiden, Trihexyphenidyl
Sedatives/Tranquilizers	Nocturnal enuresis, Transient	Decreases ability to awaken to sensation of a "full bladder," decreases mobility	Midazolam, Triazolam, Alprazolam, Lorazepam, Chlordiazepoxide, Diazepam
Tricyclic antidepressants	Overflow (urinary retention)	Anticholinergic effect which can interfere with bladder contraction	Amitriptyline, Desipramine, Nortriptyline
Urinary incontinence drugs	Overflow (urinary retention)	Drugs used to treat urge incontinence may have anticholinergic effect that causes urinary retention	Oxybutynin, Probantheline, Solifenacin, Tolterodine, Trospium



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Absorbent Product Selection

Light Slight volume of urine, less than half a cup or 100cc	» Stress incontinence » Can walk with or without assistance » Urinary Incontinence			
 to 		PADS (FEMALE)	LINER	PROTECTIVE UNDERWEAR
Moderate Moderate volume of urine, up to one cup or 250cc	» Stress, urge, mix or transient incontinence » Can walk with or without assistance » Dementia			
 to 		LINER	PROTECTIVE UNDERWEAR	PROTECTIVE BELTED UNDERGARMENTS
Heavy Large volume of urine, up to 2 cups or 500cc	» Urge, overflow, or bowel incontinence » Bedridden » Difficulty walking or standing			
 to 		LINER	BRIEFS	PROTECTIVE UNDERWEAR
Heavy Plus Volume of urine more than 2 cups or 500cc in 4 hours	» Overflow or bowel incontinence » Contracted, bedridden » Difficulty walking or standing » Loose stool			  
 to 		LINER	BRIEFS	PROTECTIVE UNDERWEAR, HIGH CAPACITY
		PROTECTIVE UNDERWEAR, HIGH CAPACITY	ULTRASORBS OR EXTRASORBS DRYPAD	DRYPAD



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Disposable Absorbent Product Selection and Sizing Guidelines

Purpose

To promote normal bladder function and individualized, dignified incontinence care while maintaining CMS F-Tag 315* compliance and efficient resource utilization. Each incontinent resident must be identified, assessed and treated to promote optimal bladder functioning. (CMS F-Tag 315), level of continence, ability to understand, ability to express, activities of daily living, absorbency and leakage protection will be guidelines for absorbent disposable product selection.

Policy

Continence and Incontinence care issues are handled with dignity, appropriate options, absorbent disposable product selection and sizing to insure optimal skin care, comfort and pressure ulcer prevention. During orientation and as needed, all staff will receive training on appropriate product selection and usage.

Indications

On admission, quarterly and at change of status, residents will be assessed as Continent or Incontinent of bladder and bowel. If resident is Incontinent of bladder and/or bowel, the following procedure will be implemented.

Procedure

1. On admission, quarterly and at change of status, continence status is documented and/or, if unavailable, is assessed for 72 hours to determine level and type of incontinence by using continence categories of MDS 3.0 definition of continence self control (H).
2. Assess resident's status regarding activities of daily living (specifically toileting), ability to understand others, ability to express ideas to others, combative behavior and the type of toileting program/bladder retraining, if appropriate.
3. Identify appropriate absorbent disposable product type to manage type and quantity of voids using a Medline Product Selection guide, Medline FitRight® Sizing Wheel or FitRight® Assessment Tool (if pull-ups or bladder-control pads are used, no more than 3 per day should be indicated unless care is planned).
4. Measure the resident using sizing guidelines and Medline tools: Tape Measure, FitRight® Sizing Wheel or FitRight® Assessment Tool to determine the most appropriate size of product to best accommodate each individual patient's needs.
5. Provide education to the patient and/or family and document as per facility protocol.
6. Assess efficacy of chosen product and adjust the plan of care as necessary. (Assess for skin integrity, color, breakdown, resident comfort, and that correct sizing and application techniques are in use.)
7. Notify appropriate staff concerning any change in type and quantity of products needed to insure availability and adequate supply delivery (Purchasing, Restorative, etc.).



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Sizing Guidelines

Tape Measure

1. Using the Tape Measure, measure the waist, hips or thighs (select the largest area).
2. The size will be indicated by the color on the tape measure at the second side of the body (at the widest part).

Sizing Wheel

1. Gather the resident's weight and height using the latest available data.
Determine the resident's weight and, on the Product Sizing (white) side of the wheel, locate it at the top window.
2. Locate resident's height above the lower windows on the wheel.
3. Note the color-coded triangle below the height indicator; this is the size brief required.

FitRight Assessment Tool

1. Gather the resident's height, weight, gender and continence status base on MDS section H, Item 0300 and 0400 using the latest available data.
2. Input all gathered information in the resident master data screen to determine manufacturer recommended product and size for each resident.
3. Communicate recommended product for each resident in the patient charts and to the nursing staff.

Additional Guidelines

- » Adequate perineal care is an essential component of adequate continence management.
- » Proper application techniques must be practiced for maximum product efficacy.
- » Products are never to be doubled unless specified in Manufacturer's guidelines that product is intended for this type of use.
- » Only air-permeable products are to be utilized on pressure-reduction support surfaces such as low airloss beds.
- » Product delivery should only be adequate for a several-day supply (never overstock rooms).
- » Bariatric products should only be used for residents with measurements between 65 inches and 94 inches.

*Guidelines from the Centers for Medicare & Medicaid Services and CMS TAG F315

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Sizing Tools and Tips for Briefs

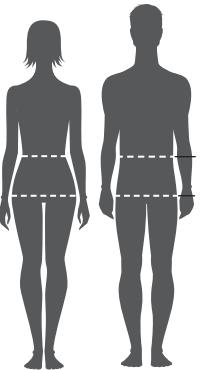
By Hip and Waist Measurements

Measure the hips or waist, whichever appears larger as follows:

STEP 1: Measure hip bone to hip bone and over the abdomen

STEP 2: Double the largest measurement obtained in Step 1 and add two inches

STEP 3: Using this figure, make product size selection from the chart below



Example:

1. Hip bone to hip bone = 19" (49 cm)
2. $19" \times 2$ (49 cm \times 2) = 38" + 2" (97 cm + 5 cm) = 40" (102 cm)
3. 40" (102 cm) = Medium or Regular Brief

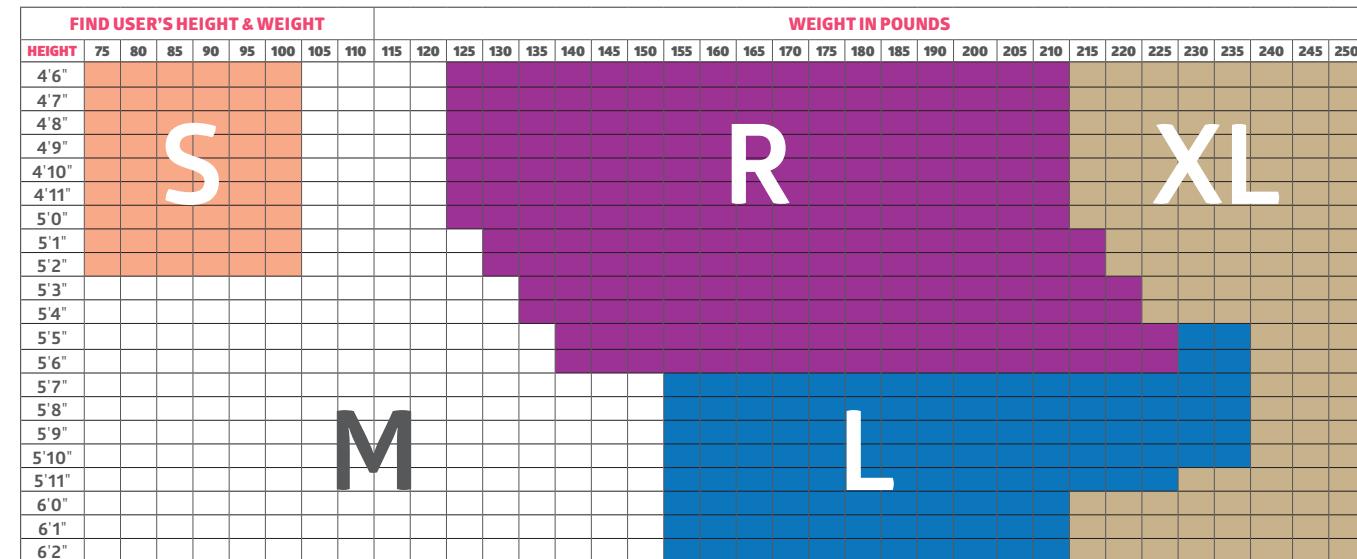
FitRight® Sizing Options FitRight® Tape Measure (inside your tool kit)



Place hip bone to hip bone over the abdomen, front side of body only—note color coded size recommendation

Brief Size Selection

● SMALL = 20-32" (51-81 cm)
○ MEDIUM = 32-42" (81-107 cm)
● REGULAR = 40-50" (102-127cm)
● LARGE = 48-58" (122-147 cm)
● X-LARGE = 59-66" (150-168 cm) (beige)
● XX-LARGE = 60-69" (152-175 cm)
● BARIATRIC = 69-90" (165-229 cm)



Sizing chart above is a recommendation only. ALSO AVAILABLE: BARIATRIC SIZE XXXL (For patients weighing more than 250 lbs.; waist size from 70 to 90").

By Height and Weight

Female (weight)	Brief Size	Color	Waist or Hip*
75-90 lbs.	Small	●	20-32" (51-81 cm)
90-115 lbs.	Medium	○	32-42" (81-107 cm)
115-130 lbs.	Assess for Medium/Regular	●	40-50" (102-127 cm)
130-175 lbs.	Assess for Regular/Large	●	48-58" (122-147 cm)
175-235 lbs.	X-Large	●	59-66" (150-168 cm)
235-250 lbs.	XX-Large or Mesh Pants	●	60-69" (152-175 cm)
250 lbs. & heavier	Bariatric	●	69" & up (175 cm +)
Male (weight)	Brief Size	Color	Waist or Hip*
120-150 lbs.	Medium	○	20-32" (51-81 cm)
150-200 lbs.	Assess for Medium/Regular	●	40-50" (102-127 cm)
200-235 lbs.	Assess for Regular/Large	●	48-58" (122-147 cm)
200-235 lbs.	X-Large	●	59-66" (150-168 cm)
235-250 lbs.	XX-Large or Mesh Pants	●	60-69" (152-175 cm)
250 lbs. & heavier	Bariatric	●	69" & up (175 cm+)

*Use the larger of the two

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Clinical Education

Sizing for Adult Briefs—Skill Review Validation Form

Employee's Name: _____ Date: _____

1 Assemble supplies including color-coded measuring tool, copy of the Resident Data form or other note paper to record measurements, and pen.			
2 Wash your hands or use hand sanitizer according to your protocols.			
3 Greet the resident by name and provide an explanation of what you are doing.			
4 Explain that a proper fitting product is important to healthy skin and overall comfort.			
5 Assure resident comfort.			
6 Open a Medline measuring tool with color-coded side facing you.			
7 Determine the largest part of the body, hip bone to hip bone or thigh to thigh.			
8 Feel for the right hip bone or widest part of the thigh of the patient and place the left side (beginning) of the measuring tool there.			
9 Drape the measuring tool over largest part of the hips or abdomen. It should lie smoothly and flat over the body. It is acceptable to measure over the clothes.			
10 Place your thumb on the right side of the measuring tool at the left hip bone or thigh.			
11 Note the size and color of the product selected. If the area noted is very close to the next size up, choose the larger size.			
12 Thank the resident and discard the measuring tool, if disposable.			
13 Wash your hands or use hand sanitizer according to your protocols.			
14 Report your findings to the nursing staff for recording on the plan of care.			

Application Guide: Adult Brief



- 1. Fold the product in half lengthwise with the backsheet facing to the outside.**

1. Doble el producto longitudinalmente por la mitad con la superficie posterior encarada hacia fuera.



- 2. While folded, insert or apply the product from the front to the back.**
During this process, pull the product up into the perineal area, centering it front to back. Unfold, spread and center the product across the back-side.

2. Mantenga el producto doblado e intodúzcalo o aplíquelo de delante hacia atrás. Durante esta operación, lleve el producto hasta la zona perineal y céntrelo de delante hacia atrás. Desdoble, estire y centre el producto por la parte posterior.



- 3. Unfold, spread and center the product across the front-side. Gently pull the skin of each inner thigh downward or away from the perineal area, allowing the leg cuffs to move into the now-exposed crease.**

3. Desdoble, estire y centre el producto por la parte anterior. Con gran cuidado estire hacia abajo o retire de la zona perineal la piel de los muslos interiores permitiendo que los pliegues internos del producto coincidan con el pliegue ha quedado visible.



- 4. Apply the upper tabs while pulling the back wings snugly over the front wings. Apply the lower tabs at a slightly upward angle, while tucking the front wings smoothly in and under the back wings. Smooth out all the wrinkles and folds while checking the fit of the product. Adjust as needed.**

4. Aplique las cintas de cierre adhesivas superiores y estire simultáneamente las alas posteriores de forma que ajusten perfectamente sobre las alas delanteras. Aplique las cintas de cierre adhesivas inferiores

de modo que se forme un ángulo ligeramente hacia arriba e introduzca al mismo tiempo las alas delanteras ligeramente por debajo de las alas traseras. Alise las arrugas y pliegues que se hayan formado mientras comprueba la colocación del producto. Ajustelo según sea necesario.

Please Note

- » When applying hook tabs, gently press down on the tab and pull back slightly for a more secure attachment.
- » Al aplicar cintas de cierre adhesivas de gancho, presione suavemente hacia abajo la lengüeta y tire un poco hacia atrás para un apego más seguro.



Experiencing Problems with Leakage?

- » Ensure that leg cuffs are placed tightly in the creases between perineal area and thighs.
- » Correct application of product on resident.
- » Correct sizing of product.
- » Ensure that poly of the leg gathers is facing out.
- » Center the product correctly in both directions.
- » Ensure that plastic is not touching skin.

Skin Irritations?

- » Excessive use of petroleum moisture barriers may clog product.
- » Males point penis down.
- » Evaluate absorbency; evaluate change rate. Consider a more absorbent product.
- » Staff in-serviced on the application of product.

Poor Fit?

- » Ensure that leg cuffs are placed tightly in the creases between perineal area and thighs.
- » Peri-care needs to be performed with each incontinent episode.
- » Make sure plastic is not touching skin.
- » Check that brief size is correct.
- » Poly of the leg gathers is facing out.

Blisters?

- » Caused by plastic touching the skin.
- » Check application.

Tearing?

- » Do not use product as a turn sheet. In-service application techniques.

¿Problema de Escape de Líquido?

- » Asegúrese de que los pliegues interiores del producto están firmemente sujetos a los pliegues entre la zona perineal y las piernas.
- » Aplicación correcta del producto en el residente.
- » Talla correcta del producto.
- » Asegúrese de que el polietileno de la entrepierna mira hacia fuera.
- » Centre el producto correctamente en ambas direcciones.

¿Irritaciones Cutáneas?

- » Asegúrese del que el plástico no está en contacto con la piel.
- » El uso excesivo de barreras de humedad de petróleo puede obturar el producto.
- » En varones, el pene apunta hacia abajo.
- » Evalúe la absorción; evalúe la frecuencia de cambio. Considere un producto de mayor capacidad de absorción.
- » El personal sabe perfectamente cómo aplicar el producto.

¿Talla Errónea?

- » Asegúrese de que los pliegues interiores del producto están firmemente sujetos a los pliegues entre la zona perineal y las piernas.
- » La cura perineal es necesario en cada episodio de incontinencia.
- » Asegúrese del que el plástico no está en contacto con la piel.
- » Asegúrese de la talla del brief es correcta.
- » El polietileno de la entrepierna mira hacia fuera.

¿Ampollas?

- » Provocadas por el contacto del plástico con piel.
- » Compruebe la aplicación.

¿Rotura?

- » No utilice el producto para voltear al paciente, hágalo según las técnicas habituales.



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Clinical Education

Adult Brief Application—Skill Review Validation Form

Employee's Name: _____ Date: _____

- | | | | |
|----|--|--|--|
| 1 | Gather supplies for the procedure. | | |
| 2 | Wash hands according to protocol. | | |
| 3 | Greet the resident by name. | | |
| 4 | Explain the procedure you are about to do. | | |
| 5 | Remove the outer garments. | | |
| 6 | Remove the soiled product from the front to the back. | | |
| 7 | Perform perineal care according to protocols. | | |
| 8 | Open the product and give it a quick snap or tug to release the leg cuffs. | | |
| 9 | Fold the product in half lengthwise with the backsheet facing toward the outside. | | |
| 10 | While folded, insert or apply the product from the front to the back. | | |
| 11 | Pull the product up into the perineal area, centering it. | | |
| 12 | Unfold, spread and center the product across the backside of the patient. Repeat with the front. | | |
| 13 | Gently pull the skin of each inner thigh downward and away from the perineal area. | | |
| 14 | Smooth the side panels across the patient one side at a time. | | |
| 15 | Apply the upper tape tabs to the top of the side panels at a slightly downward angle. | | |
| 16 | Apply the lower tape tabs to the bottom of the side panels at a slight upward angle. | | |
| 17 | Smooth out all the wrinkles and folds while checking the fit of the product. | | |
| 18 | Safely bag dispose of soiled product. | | |
| 19 | Wash hands according to protocol. | | |
| 20 | Redress the resident so that they are comfortable. | | |



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Clinical Education

Protective Underwear Application—Skill Review Validation Form

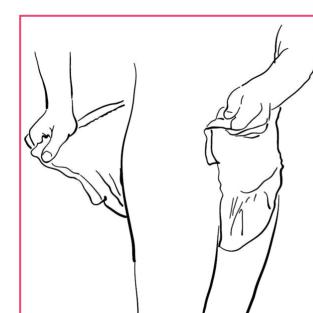
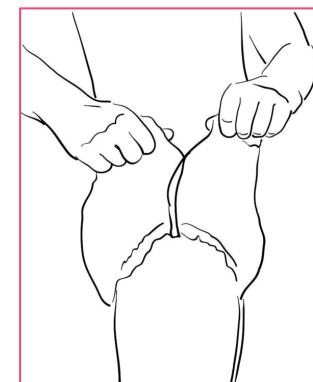
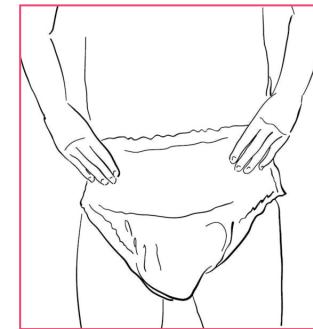
Employee's Name: _____ Date: _____

- | | | |
|---|--|--|
| 1 Gather supplies for the procedure. | | |
| 2 Wash hands according to protocol. | | |
| 3 Greet the resident by name. | | |
| 4 Explain the procedure you are about to do. | | |
| 5 Assist the resident with removal of outer garments. | | |
| 6 Remove the soiled protective underwear by tearing apart at the side seams. | | |
| 7 Perform perineal care according to protocol. | | |
| 8 Assist the resident in applying the clean protective underwear like normal underwear. | | |
| 9 Pull the protective underwear up between the legs into the groin area until it is snug and close to the body. | | |
| 10 Gently pull the skin of each inner thigh downward for proper fit of the leg cuffs. | | |
| 11 Check the protective underwear for optimal application, fit and comfort. | | |
| 12 Assist the resident with outer garments as necessary. | | |
| 13 Safely bag and dispose of soiled liners. | | |
| 14 Wash hands according to protocol. | | |



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Application Guide: Protective Underwear



- 1.** Pull on the protective underwear just like normal underwear.

1. Ponga el calzoncillo protector como si fuera ropa interior normal.

- 2.** Pull the protective underwear up and into the groin area, securing a proper fit.

2. Suba el calzoncillo protector hasta que quede entre las piernas, asegurándose de que quede bien puesto.

- 3.** Gently pull the skin of each inner thigh downward, allowing leg cuffs to move into the natural crease between the thighs and the perineal area. Check the product for optimal application, fit and comfort.

3. Tire suavemente de la piel de los muslos hacia abajo para que el resorte se desplace hasta el doblez natural entre los muslos y la región perineal. Revise el calzoncillo para asegurar la óptima aplicación, ajuste y comodidad.

Removal

- 1.** Gently tear the product open at both sides.

1. Rasgue suavemente el calzoncillo por ambos lados.

- 2.** Prior to removal, fold the product at the front and back to contain both urine and fecal matter.

2. Al quitar el calzoncillo, dóblalo por delante y por detrás para contener tanto orina como matria fecal.

- 3.** Remove the product front-to-back.

3. Retire el calzoncillo, de adelante hacia atrás.





Clinical Education

Pant and Liner Application—Skill Review Validation Form

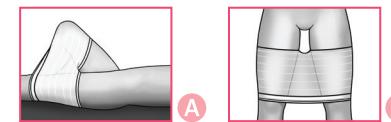
Employee's Name: _____ Date: _____

- | | | | |
|----|--|--|--|
| 1 | Gather supplies for the procedure. | | |
| 2 | Wash hands according to protocol. | | |
| 3 | Greet the resident by name. | | |
| 4 | Explain the procedure you are about to do. | | |
| 5 | Assist the resident with outer garments as necessary. | | |
| 6 | Assist the resident to pull the mesh or knit pant down to the knees on both legs. | | |
| 7 | Unfold the liner and give it a slight tug to release the leg cuffs. | | |
| 8 | Fold the liner in half lengthwise with backsheet facing outwards. | | |
| 9 | Insert the liner from the front to the back between the resident's legs. | | |
| 10 | Pull the liner up into the perineal area, centering it. | | |
| 11 | Open and spread the liner evenly across the back best coverage of the patient's backside. Repeat with the front. | | |
| 12 | Pull the mesh or knit pant upward and over the liner and smooth out the wrinkles. | | |
| 13 | Gently pull the skin of each inner thigh downward for proper fit of the leg cuffs. | | |
| 14 | Check the pant and liner for optimal application, fit and comfort. | | |
| 15 | Assist the resident with outer garments as necessary. | | |
| 16 | Safely bag and dispose of soiled liners. | | |
| 17 | Wash hands according to protocols. | | |



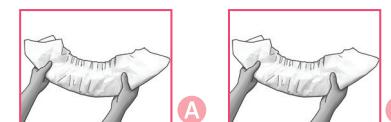
Application Guide: Pant and Liner

A = Lying Down B = Standing



1. Pull the pant on to the waist and then pull the top down over the bottom of the knees, positioning the legs as shown.

1. Suba el calzoncillo hasta la cintura y luego baje la parte superior hasta pasadas las rodillas, colocando las piernas como se muestra.



2. Unfold the liner and give it a slight tug at the ends to activate the leg cuffs. Fold the liner in half lengthwise with the backsheet facing outwards.

2. Desdoble el protector y estírelo un poco en las esquinas para activar el resorte de las piernas. Doble el protector por la mitad a lo largo, con la capa de atrás hacia afuera.



3. Insert the liner front-to-back, working it up and into the groin area until it is centered evenly front-to-back.

3. Coloque el protector de adelante hacia atrás, acomodándolo en la entrepierna hasta que quede centrado por delante y por detrás.



4. Open and spread the liner evenly across the backside, centering it on the spine using the wetness indicator as a guide.

4. Abra el protector y extiéndalo por la parte trasera, entrándolo sobre la columna vertebral usando el indicador de humedad como guía.



5. Pull the pant upward and over the liner on the backside, spreading the liner again during the process.

5. Reacomode el calzoncillo sobre el protector en la parte trasera, extendiendo el forro nuevamente al hacerlo.



6. Open and spread the liner evenly across the front while pulling the pant upward to the waist.

6. Abra y extienda el protector el través de la parte delantera, a la vez que sube el calzoncillo hacia al cintura.



7. Gently pull the skin of each inner thigh downward, allowing the leg cuffs to move into the natural crease between the thighs and the perineal area. Check the pant and liner for optimal application, fit and comfort.

7. Tire suavemente de la piel de los muslos hacia abajo para que el resorte se desplace hasta abajo para que el resorte se desplace hasta el doblez natural entre los muslos y la región perineal. Revise el calzoncillo y el protector para verificar la mejor aplicación, ajuste y comodidad.

Experiencing Problems with Leakage?

- » Ensure that leg cuffs are placed snugly in the creases between perineal area and thighs.
- » Correct application of product on resident.
- » Correct sizing of product.
- » Ensure leg gathers are facing out.
- » Center the product correctly in both directions.

Skin Irritations?

- » Excessive use of petroleum moisture barriers may clog product.
- » Males point penis down.
- » Evaluate absorbency; evaluate change rate. Consider a more absorbent product.
- » Review application education of product.

Blisters?

- » Ensure that leg cuffs are placed snugly in the creases between perineal area and thighs.
- » Peri-care needs to be performed with each incontinent episode.
- » Check that pant size is correct.
- » Poly of the leg gathers is facing out.

¿Problema de Escape de Líquido?

- » Asegúrese de que los pliegues interiores del producto están cómodamente sujetos a los pliegues entre la zona perineal y las piernas.
- » Aplicación correcta del producto en el residente.
- » Talla correcta del producto.
- » Asegúrese de que el polietileno de la entrepierna mira hacia fuera.
- » Centre el producto correctamente en ambas direcciones.

¿Irritaciones Cutáneas?

- » El uso excesivo de barreras de humedad de petróleo puede obturar el producto.
- » En varones, el pene apunta hacia abajo.
- » Evalúe la absorción; evalúe la frecuencia de cambio. Considere un producto de mayor capacidad de absorción.
- » Revise la educación de la aplicación del producto.

¿Ampollas?

- » Compruebe la aplicación.



Incontinence
Solutions

Medline Drypads Guidelines

Policy

The following guidelines have been established for the safe, efficient and cost effective use of the Medline Drypads.

- » Dual purpose pad for incontinence management and skin/wound care for at risk patients.
- » Medline drypads are premium disposable, breathable incontinent pads for moisture management for patients at risk for skin breakdown.
- » Medline drypads are multi-void products that hold up to 1000cc fluid.
- » May be used on all bed surfaces, including low air loss beds.
- » Determination for use resides with nurses and wound care specialists.

Purpose

A multi-void product that helps promote dry skin.

Indications

Incontinence management for residents at risk for skin breakdown/pressure ulcer development.

Contraindications

- » Not for use with chronic loose stools or severe diarrhea.
- » Not a transfer device.
- » Should not be used for ambulatory patients who can get out of bed.
- » Rehab candidates should be provided with briefs or pull-ups for safety and dignity.

Procedure

- » The Medline drypads are to be placed printed side down on top of a draw sheet under the patient in bed or on a stretcher.
- » It can be placed horizontally or vertically for maximum fluid capture, depending on the voiding pattern of the individual.
- » Patient transfer and/or repositioning occurs with the draw sheet, not the underpad, for best practice compliance (patient and staff safety).
- » Product is disposable.
- » Product should be removed and discarded. Do not send to laundry with other linens.



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Incontinence
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Disposable Absorbent Product Identification System

Product	Size and/or Style						
STANDARD BRIEFS	Small	Medium	Regular	Large	X Large	XX Large	Bariatric
STRETCH BRIEFS	-	Size 1 MD/RG		Size 2 LG/XLG	Size 3 LG/XLG		
OVERNIGHT BRIEFS	Small	Medium		Large	X Large		
PROTECTIVE UNDERWEAR	Small	Medium		Large	X Large	XX Large	
LINERS		Moderate		Heavy		Maximum	Bariatric
PADS			DryPads				

Instructions for Use

The product identification system (as seen above) is designed to promote proper product selection, fit and comfort. Please follow the step-by-step instruction to implement the system:

- Step 1: Identify the proper product type using the decision tree for disposable incontinence products.
- Step 2: Measure the resident and identify proper size using the sizing guide or sizing matrix.
- Step 3: Select sticker with symbol representing product category and size.
- Step 4: Place sticker next to resident's nametag or designated location.
- Step 5: Instruct staff to use proper product type and size for identified resident.

Helpful Hints

Select the correct symbol based on the following:

Stress incontinence	Pads	Seahorse
Ambulatory or combative (Alzheimer's)	Protective Underwear	Frog
Ambulatory, weight-bearing (1-person assist)	Liners	Turtle
Bedridden, contracted or combative	Briefs	Fish
Bedridden, chronic diarrhea or agitated at night	Overnight Briefs	Dolphin
Open-airing, low-air-loss system	DryPad	Seal



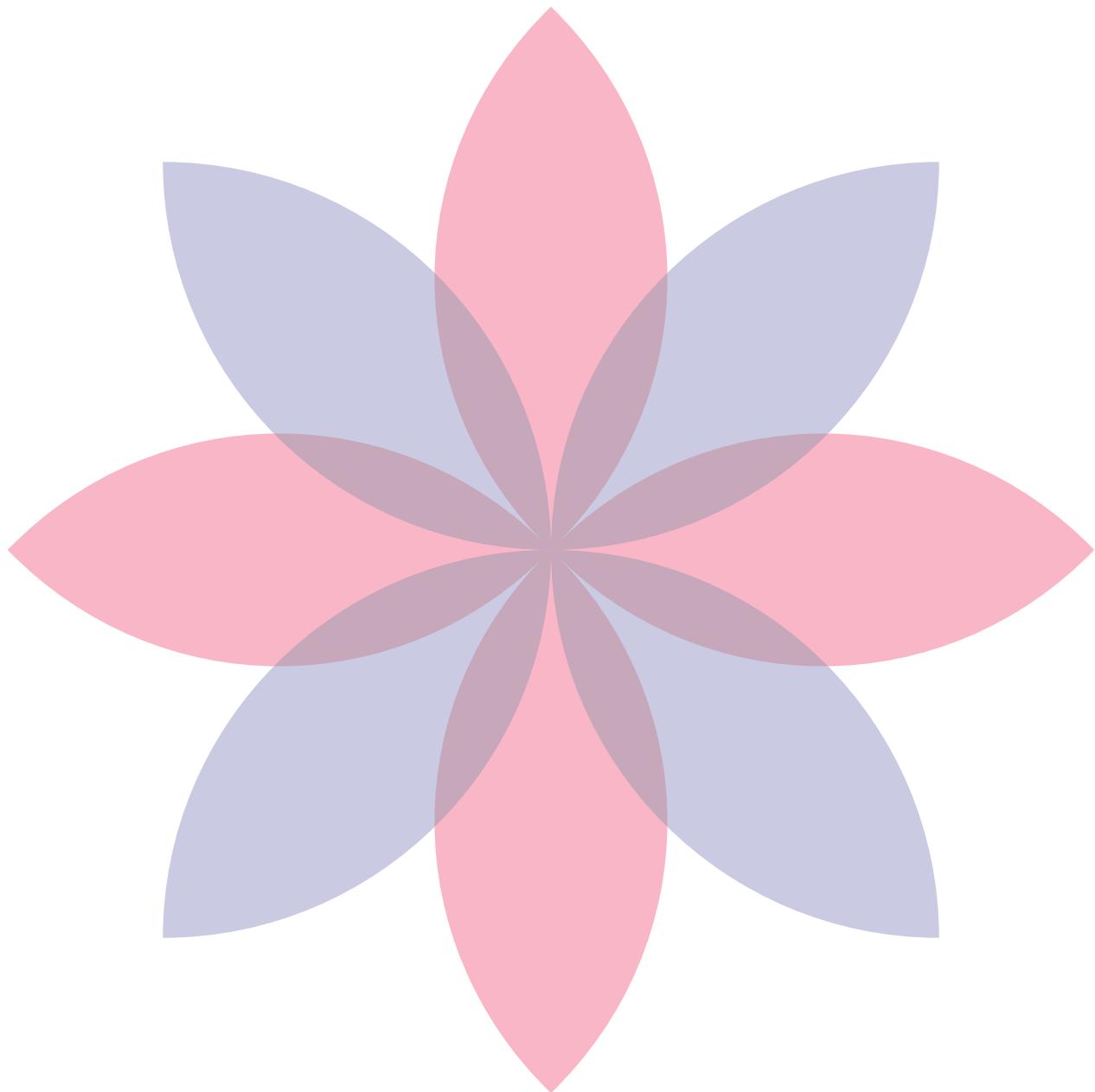
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