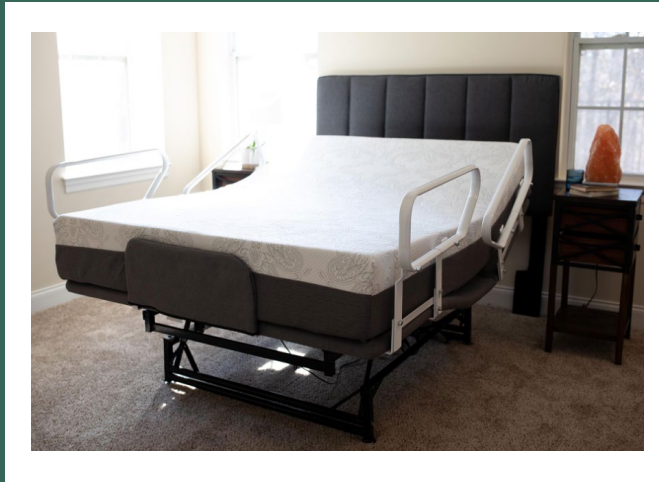


# SUPPORT SURFACES, SPECIALTY BEDS AND ENCLOSED BEDS ... UNDER THE COVERS

PRESENTED BY: SUE NORMAN, COTA AND ROBBI HAASE, ATP, CRTS



# OVERVIEW



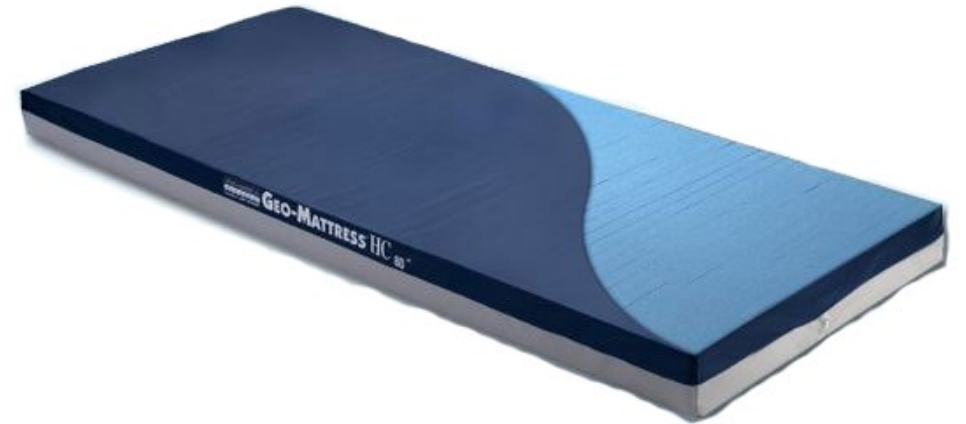
- Group I and Group II Support Surfaces
- Qualifications and Documentation Requirements
- Specialty Beds/Bed Frame Adjustability Features
- Night-time Positioning Systems
- Enclosed Beds
- Questions
- Conclusion
- Contact Information

# GROUP I SUPPORT SURFACES



## Span America Geo-Mattress HC

- Designed for patients at risk of pressure injury
- Cut from a single layer of high-quality foam
- Fluid resistant, antimicrobial, wipe clean, nylon/vinyl cover
- HCPC Code: E0184



# GROUP I SUPPORT SURFACES



## Drive Medical Bariatric ShearCare 1500

- Provides pressure redistribution and shear/friction resistance
- High-density die-cut foam
- Fluid resistance/wipeable cover
- HCPC Code: E0184



# GROUP I OVERLAYS



## Span America Gel 80

- Delivers effective pressure redistribution by encapsulating multiple gel bladders within a high-density sculpted base
- Sculpted high density polyurethane foam topper and highly resilient foam base layer
- Ideal for those vulnerable to pressure injury
- HCPC Code: E0185



# GROUP I OVERLAYS



## ROHO Prodigy System

- Intended to conform to an individual's shape to provide skin/soft tissue and deep tissue injury protection
- Non-powered, self adjusting air
- Three zoned snap together sections – each 36"x27"
- Durable poly-urethane material can be easily cleaned with soap and water
- HCPC Code: E0197



# GROUP I PADS



## Alternating Air Pump and Pad System

- Alternately inflates and deflates 130 individual bubble air cells
- Consistent air flow and pressure of 4 LPM
- HCPC Code: E0181



# GROUP I PADS



## Synthetic Sheepskin

- 100% polyester pile pad helps prevent friction/shear
- Machine washable and dryable
- Available in either 24"x30" or 30"x40"
- HCPC Code: E0188



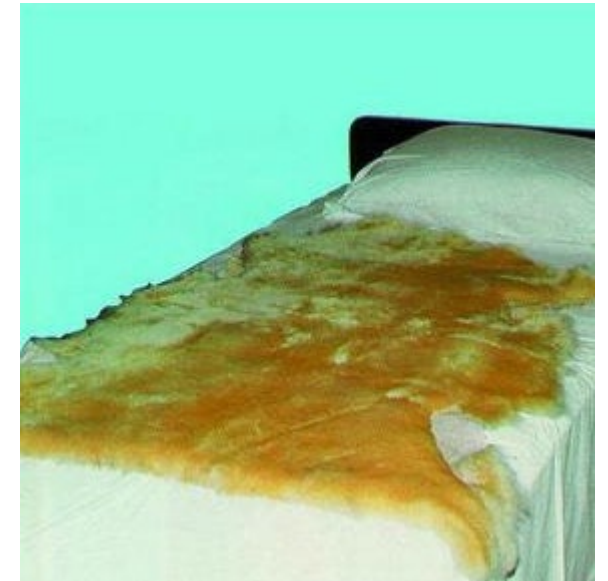


# GROUP I PADS



## Lambswool Sheepskin

- 100% medical sheepskin is a natural treatment that helps prevent pressure injury/friction/shear
- Machine washable and dryable
- Available in 30"x36" or 30"x72"
- HCPC Code: E0189

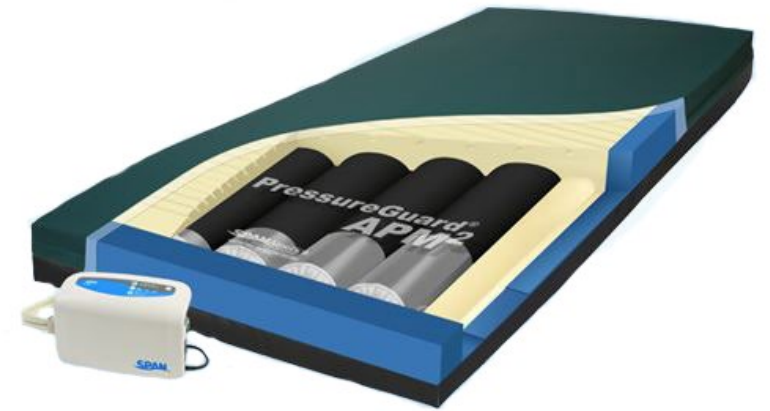


# GROUP II SUPPORT SURFACES



## Span America PressureGuard APM 2

- Alternating pressure and lateral rotation in one surface
- Patented safety edge with cradling effect for user safety
- Provides overall stability while offsetting friction
- Redistributes pressure, reduces heat and skin moisture buildup
- If power outage, will not deflate
- HCPC Code: E0277



# GROUP II SUPPORT SURFACES



## Span America Easy Air

- Low air-loss therapy with alternating pressure
- Perimeter safety edge, no need for side rails.
- Documented superiority in moisture removal
- Redistributes pressure, reduces heat and skin moisture/ micro-climate management
- Maintains therapeutic inflation in a power outage
- HCPC Code: E0277

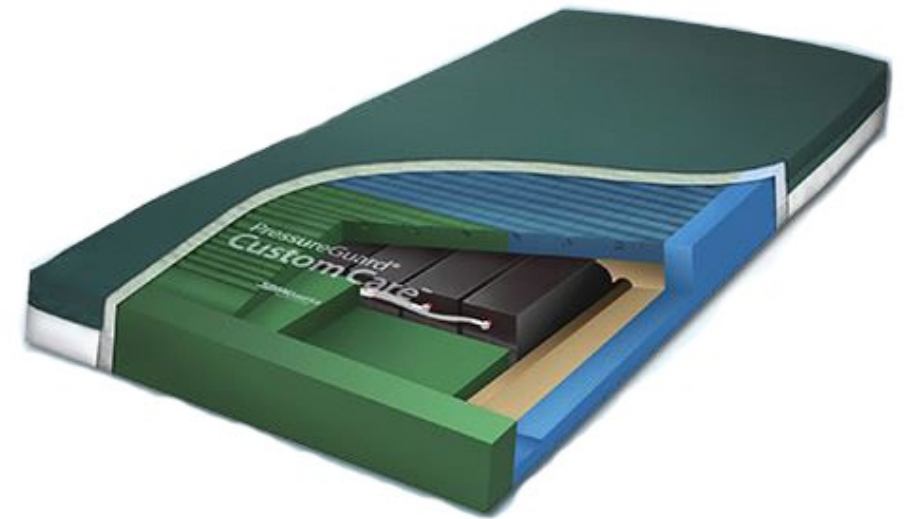


# GROUP II SUPPORT SURFACES



## Span America Custom Care

- Non-powered pressure redistribution
- Provides effective, non-powered shear-reducing pressure redistribution
- Interconnected longitudinal support chambers react to changes in surface loading as user repositions
- HCPC Code: E0373



# GROUP II SUPPORT SURFACES



## Prius Rhythm Multi Mattress System

- True low air loss and pulsation modes to promote wound healing
- User-friendly high flow control unit offers 10 comfort levels; adjustable turning cycles
- HCPC Code: E0277



# SUPPORT SURFACES



## Other Options- pros/cons

- Traditional air systems such as Micro Air, Tri Cell, Drive Medical Low Air Loss, etc.
- Safety concerns with these traditional types of technology include:
  - Bottoming out due to improper pump programming, accidental turning off pump, sitting up past 30-degree angle.
  - Patient falling out of bed due to no perimeter safety ledge.
  - Power failure resulting in complete deflation/re-inflation causing entrapment/injury.
  - Must be on a hospital bed with rails.

# QUALIFYING CRITERIA – GROUP I



- Patient is immobile or has limited mobility
- History of Pressure injury
- Impaired nutrition
- Fecal or urinary incontinence
- Decreased sensation
- Compromised circulatory status

# MEDICAL RECORDS – GROUP I



- Completely immobile (cannot make changes in body position without assistance) **OR**
- Limited mobility (cannot make changes in body position without assistance significant enough to alleviate pressure with one of Support Surface Conditions A-D below) **OR**
- Wound assessment/clinical evaluation records that supports any stage pressure injury on the trunk or pelvis with one of Support Surface Conditions A-D below
  - A – Impaired nutritional status
  - B – Fecal or urinary incontinence
  - C – Altered sensory perception
  - D – Compromised circulatory status



# QUALIFYING CRITERIA – GROUP II



- Multiple stage 2 pressure injury on the trunk or pelvis and having utilized a group I support surface for at least 30 days and showing no improvement.
- One large stage 3/4 or multiple stage 3/4 pressure injuries on trunk/pelvis
- On a comprehensive pressure injury treatment therapy program
- Had a myocutaneous flap or skin graft surgery within the first 60 days of procedure.

# MEDICAL RECORDS – GROUP II

- Large or multiple stage 3 or 4 pressure injury on the trunk or pelvis **OR**
- A mycutaneous flap or skin graft on the trunk or pelvis within the past 60 days **AND** has been on a Group II or III support surface immediately prior to discharge within the past 30 days **OR**
- Multiple stage 2 pressure injury on the trunk or pelvis which have failed to improve over the past 30 days during which time the patient has been on a comprehensive pressure injury treatment program including **ALL** of the following:
  - Use of an appropriate Group I surface
  - Regular assessment by a healthcare professional
  - Appropriate turning and re-positioning
  - Comprehensive wound care treatment
  - Proper management of moisture/incontinence
  - Nutritional assessment and intervention consistent with the overall plan of care

# SPECIALTY BEDS



- Sometimes a patients' priority is to obtain an adjustable bed that has a less institutional appearance (non-hospital bed appearance)
- When a wider than twin size is requested (full, queen, king)
- Non-covered/coded by insurance (specialty beds are considered “furniture”)

# SPECIALTY BEDS



## Transfer Master Supernal Hi-Low Bed

- Combines a full-featured adjustable bed with elegance and comfort
- Available in twin, full, queen and dual king
- Excellent height range for flexibility of use
- Support Surfaces are Group I Medical grade
- Head, foot and hi-low adjustable
- Available with or without casters



# SPECIALTY BEDS



## Flexabed Hi-Low Bed

- A luxury alternative to hospital beds
- Base can be raised and lowered vertically with the touch of a button
- Sleep next to your loved one with the dual king option
- Ideal bed for those in home healthcare or assisted living environments
- Several comfortable mattress options available



# SPECIALTY BEDS



## Pro-Bed Freedom Bed

- Unique, programmable computer-controlled, therapy system that manually or automatically turns the bed-user to multiple stable sleeping positions
- Mimics the body's natural nocturnal motion in order to re-establish blood flow to compressed tissue and preventing the formation of pressure injury and other complications due to immobility.
- Motion is timed (rather than random) and the rate is adjustable to permit the accommodation of a wide variety of sleeping patterns.



# NIGHT-TIME POSITIONING SYSTEMS



## Symmetrisleep System

- Provides dynamic support throughout the night when the body is most relaxed and susceptible to change
- Proven system widely used to protect and improve body shape as well as function
- The system work in prone, supine, side or semi-side lying positions
- Highly portable and easy to install, adjust or remove



# NIGHT-TIME POSITIONING SYSTEMS



## Simple Stuff Works

- Therapeutic positioning equipment for all ages
- Base layer comprised of two layers of anti-microbial non-slip mesh
- Temperate Topper is a soft mattress topper filled with a state-of-the-art material that wicks moisture away from the skin
- Variety of leg supports offer unique and clinically effective positioning





# SHEETS/BED COVERINGS



- Avoid/discourage using multiple layers on therapeutic support surfaces (blankets, pads, quilts, etc.) as this will prevent the client from achieving optimal therapeutic benefit.
- Jersey sheets, AKA T-Sheets are highly recommended to help minimize friction/shear and hammock effect while on the therapeutic surface.

# BED FRAME ADJUSTABILITY



Proper bed positioning is important in order to maintain proper alignment and prevention of pressure injury.

- Safe Positioning – The recommended elevated position is at a 30 degree angle. Greater than is acceptable for short periods of time (eating, etc.)
- When elevating the head of the bed, best practice is to first elevate the foot end at least 12 degrees, then raise the head.



# ENCLOSED BEDS



## Also referred to as:

- Safety beds
- Special needs beds
- Adaptive beds
- Canopy beds
- Hospital Grade Enclosed Cribs
- HCPC Codes: E1399 (Enclosed bed manufactured as a unit, misc.)  
E0316 (enclosure), E0300 (hospital grade enclosed crib)



Hannah 135 natural

# WHAT IS AN ENCLOSED BED

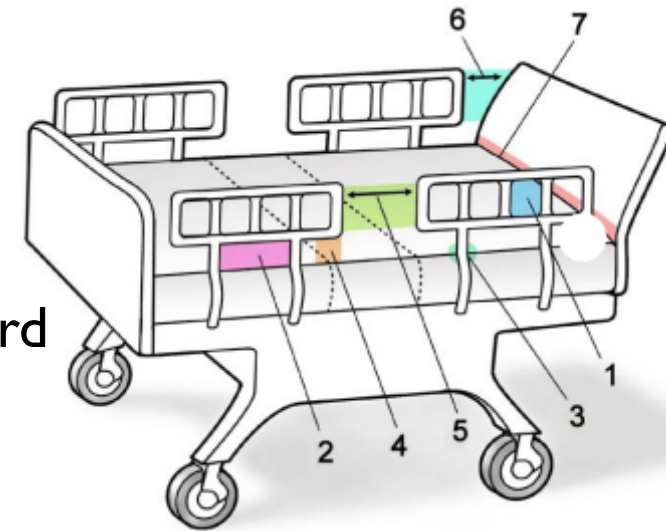


- Enclosed beds are hospital grade beds with added safety enclosures, so the individual may not exit without assistance.
- May be totally fully or partially enclosed.
- Many varieties available, in many price ranges, addressing a wide range of needs



# 7 ZONES OF ENTRAPMENT (FDA)

1. Within the Rail
2. Under the Rail, Between the Rail Supports or Next to a Single Rail Support
3. Between the Rail & the Mattress
4. Under the Rail, at the Ends of the Rail
5. Between Split Bed Rails
6. Between the End of the Rail & the Side Edge of the Head or Foot Board
7. Between the Head or Foot Board & the Mattress End



<https://www.fda.gov/media/71460/download>

# WHY THE NEED FOR AN ENCLOSED BED?



Enclosed beds create low stimulation; a calming, predictable environment that can encourage relaxation and sleep; it can remove the risk of harm.

- Protects from elopement
- Reduces anxiety
- Provides non-restrictive enclosure
- Shields from self-harming behavior
- Protects from falls
- Prevents entrapment
- Encourages developmental movement





# WHO IS APPROPRIATE FOR AN ENCLOSED BED?



- Adults and children who have severe elopement issues.
- Muscle conditions (especially cerebral palsy)
- Seizure disorders
- Movement disorders
- Cognitive impairment or developmental disability
- Severe behavioral disorders
- Self-injurious behaviors
- Balance problems
- Memory issues/dementia



# OTHER LESS COSTLY, ALTERNATIVES MUST BE TRIED



- Enclosed beds are considered medically necessary and the least costly alternative only in the most extreme conditions due to the restrictive nature of the beds and the confinement they entail
- Enclosed beds are not a substitute for responsible parenting or supervision of the patient.
- An enclosed bed should only be used when all other least costly modalities have been tried and have failed to provide a safe environment. This may include but not limited to:
  - Behavior modification strategies
  - Removing safety hazards from the recipient's bedroom





# COMMERCIAL PRODUCTS THAT MAY BE SUCCESSFUL



Carrying Bag (Sky Blue)



**Set up in seconds!**

1. Remove tent from case
2. Throw into an open area



3. Secure with stakes



-33% \$49<sup>99</sup>



# PADDING AND/OR PLACING A MATTRESS ON THE FLOOR



# HELMETS FOR HEAD BANGING



4 COLOR  
OPTIONS



PURPLE



NAVY BLUE



SILVER



BLACK



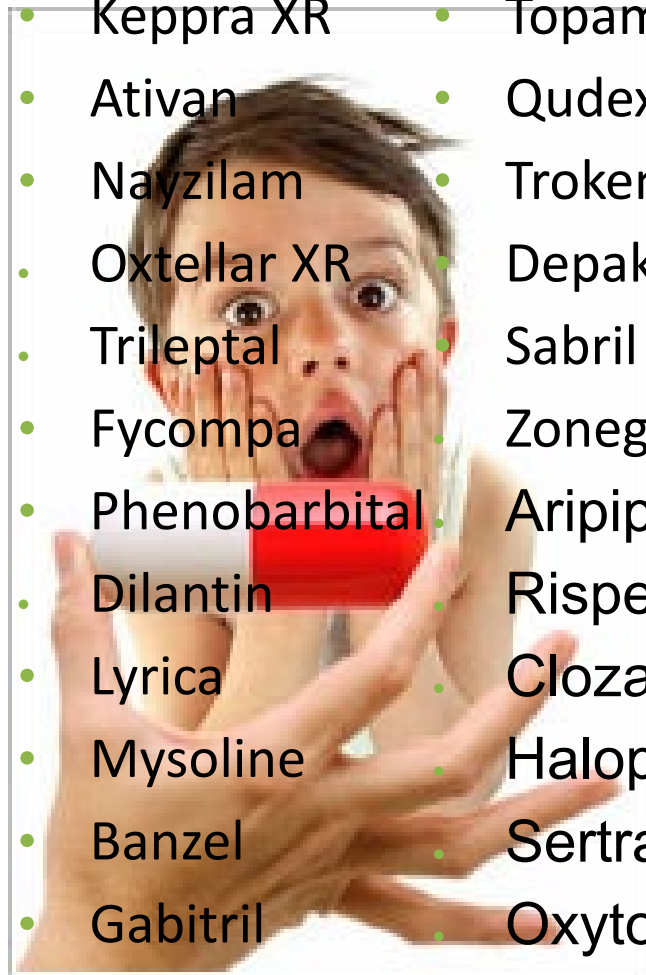
MEDICAL GRADE • FDA REGISTERED



# DOCUMENTING PHARMACOTHERAPY THAT HAS BEEN PRESCRIBED



- Briviact
- Epidiolex
- Venlafaxine
- Epitol
- Tegretol
- Carbatrol
- Tegretol XR
- Xcopri
- Onfi
- Sympazan
- Klonopin
- Valtoco
- Diastat
- Depacon
- Depakote
- Depakote ER
- Aptiom
- Zarontin
- Felbatol
- Fintepla
- Neurontin
- Vimpat
- Lamictal
- Keppra
- Keppra XR
- Ativan
- Nayzilam
- Oxtellar XR
- Trileptal
- Fycompa
- Phenobarbital
- Dilantin
- Lyrica
- Mysoline
- Banzel
- Gabitril
- Topamax
- Qudexy XR
- Trokendi XR
- Depakene
- Sabril
- Zonegran
- Aripiprazole
- Risperidone
- Clozapine
- Haloperidol
- Sertraline
- Oxytocin
- Secretin
- Methylpheni  
ate
- Fluoxetine
- Citalopram
- Memantine
- Rivastigmine
- Mirtazapine
- Melatonin



# SAFETY RAIL HEIGHT



The measurement from top of the mattress to the top of the rail, at the lowest position. The rail height decision is based on activity level and movement.



# TRANSFER HEIGHT



## How does the individual transfer?

- Are they ambulatory?
- Are they at a risk of falling, but independent in ambulation?
- Do they transfer to and from a wheelchair?
- Are they non-ambulatory, do they use a patient lift?
- Does the bed need to be modular, and allow for changes in the future?

*The SleepSafer® provides protection up to 36¼" above the mattress. 53" with an EXTENSION!*

## SleepSafer® Tall Bed



# POSITIONING REQUIREMENTS



## What type of positioning is needed?

Fixed- Flat surface

Manual Hydraulic Hand Crank- Elevating the Head and/or Legs and Bed

Articulating- Power control of Head and Legs

(often height of bed is manual hand crank)

Articulating with Hi-Lo- Power control of Head, Feet and Bed

Trendelenburg/Reverse Trendelenburg Bed Tilt operation

Or a combination of any of the above



# WHERE WILL THE ENCLOSED BED BE USED?

- Intended for primary residence
- Ceiling height, square footage
- Does it need to be portable?
- Dual residences, is a second bed necessary?





# OTHER CONSIDERATIONS

- Visibility vs padding
- Padding needed inside and outside
- Ventilation mesh/wooded rods/plexiglass
- Strength of mesh; can it be tightened
- Access to the individual
- Growth potential
- Size and length of mattress
- Materials and quality of construction
- Ports access feeding pumps, IV, O2, Bipap, ventilators
- Retrofittable
- Monitoring features
- Sensory Features
- Casters
- Clearance under the bed
- Ease of cleaning
- Storage
- Sleep positioning systems
- Wood grains stains & color
- Custom requests
- Warranty



# OUR MANUFACTURERS



<https://www.bedsbygeorge.com/>

<http://www.hardmfg.com/>

<https://sleepsafebed.com/>

<https://www.kayserbettenus.com/>

<https://www.abramsnation.com/>

<https://cubbybeds.com/>

<https://www.pedicraft.com/>

[Noahsbedllc.com](https://Noahsbedllc.com)

<https://courtneybed.com/>



# CHOOSING AN ENCLOSED BED



(SHAMLESS PLUG)

- Involve an Assistive Technology Professional, to help educate and select the most appropriate enclosed bed for your patient.
- When employed by a DME company, their staff can also assist with insurance questions, submitting paperwork, ordering, education, maintenance and repair.

Go to [Resna.org](https://resna.org) to find a Certified AT Professional



# CONCLUSION



## **How do we identify the best product selection for our clients.**

Handi Medical Supply will partner with you to ensure the best solution is chosen for your clients through:

- Clinical consultations
- Virtual evaluations
- Home evaluations (no charge)
- Demonstrations in our St Paul Showroom

# CONTACT INFORMATION



If you have questions about what steps to take regarding a patient, please contact:



Sue Norman  
651-230-2138  
[snorman@handimedical.com](mailto:snorman@handimedical.com)



Annie Schwartz  
651-409-0619  
[annie.schwartz@handimedical.com](mailto:annie.schwartz@handimedical.com)

If you would like your patient pressure mapped, please fax/email the request (with patient face sheet) to:



Julie Buytaert  
651-287-3533  
Fax: 651-846-4368  
[julie@handimedical.com](mailto:julie@handimedical.com)

For information on enclosed beds, please contact our Rehab Department:

651-287-3544 or [rehab@handimedical.com](mailto:rehab@handimedical.com)