“Over one million persons are afflicted with bedsores in US hospitals every year…” According to the National Decubitus Foundation, American hospitals spend an estimated 55 billion dollars a year to treat bedsores. Interestingly, this conservative figure does not include bed sore rates within care homes and nursing homes. Studies have also found that 50% of patients over the age of 70 have a fourfold increase in the rate of death. The high costs and risks associated with bed sores can be largely avoided with education and proper use of resources.

Why Pressure Relief Surfaces?
Because the first step in treating a sore at any stage is relieving the pressure that caused it. Reduce pressure by utilizing support surfaces.

What Are Support Surfaces?
Support surfaces include special cushions, pads, mattresses and beds that relieve pressure on an existing sore and help protect vulnerable areas from further breakdown.

Stages of Pressure Sores
- Stage 1 pressure sores may be painful and tender. The skin may appear reddened or darker than normal, although there are no breaks or tears in the skin.
- In stage 2, the skin breaks open, wears away, or forms a sore, which is usually tender and painful. The sore expands into the deeper layers of skin. Some skin may be damaged beyond repair or die at this stage.
- In stage 3, the sore worsens and extends into the tissue beneath the skin, forming a small crater. The risk for infection or tissue death is high.
- In stage 4, the pressure sore is very deep, reaching into muscle and bone and causing extensive damage. Damage to deeper tissues, tendons and joints may occur.

A comprehensive ulcer treatment program should generally include:
- Education of the individual and caregiver on the prevention and/or management of pressure ulcers
- Regular assessment by a nurse, physician or other licensed healthcare practitioner (usually at least weekly for an individual with a stage III or IV ulcer
- Appropriate turning and positioning
- Appropriate wound care (for a stage II, III or IV ulcer)
- Appropriate management of moisture/incontinence
- Nutritional assessment and intervention consistent with the overall plan of care

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Pressure Relief Solutions

“Creating lasting partnerships for the care of your loved ones and empowering our community with quality service and products”
Group 1 Surfaces

Alternating Pressure Pad (APP)
The APP utilizes inflating and deflating air-filled “bubbles,” to automatically change the pressure points beneath the patient every 2½ to 4 minutes. The small external air pump can be anchored to the hospital bed.

Gel Foam Overlay
Gel & Foam 3½” thick mattress overlay. Four large 2” thick gel bladders are encased inside a polyurethane foam mattress core. Vapor permeable waterproof cover with low friction and shear. Strong, elastic corner-securing straps reduce overlay movement. Smaller unit available for wheelchair seating.

Group 2 Surfaces

Roho Dry Floatation Device
Constructed of individual cells that move independently, allowing each to twist, turn, bend, move up and down, and adapt precisely to the contours and anatomy of the patient. The unique cellular design allows for immersion into the cushion without deforming tissue, minimizing the chance of skin breakdown. Available for beds and wheelchair seating.

Low Air Loss System
This mattress replacement system is designed to provide comfort and durability to the patient with pressure ulcers. Constructed of durable medical grade nylon and urethane fabrics it circulates fresh, dry air between the patient and the support surface. Very quiet air controller unit is anchored to the bed.

What Does Medicare Cover?
Group 1 support surfaces are considered medically necessary if the individual meets:

• Criterion 1, or
• Criteria 2 or 3 and at least one of criteria 4-7

1. Completely immobile - i.e., individual cannot make changes in body position without assistance.
2. Limited mobility - i.e., individual cannot independently make change in body position significant enough to alleviate pressure.
3. Any stage pressure ulcer on the trunk or pelvis.
4. Impaired nutritional status.
5. Fecal or urinary incontinence.

6. Altered sensory perception.
7. Compromised circulatory status.

Group II support surfaces are considered medically necessary if the individual meets:

• Criterion 1 and 2 and 3, or
• Criterion 4, or
• Criterion 5 and 6

1. Multiple stage II pressure ulcers located on the trunk or pelvis.
2. Individual has been on a comprehensive ulcer treatment program (*see back of brochure) for at least the past 30 days that has included the use of an appropriate group 1 support surface.
3. The ulcers have worsened or remained the same over the past month.
4. Large or multiple stage III or IV pressure ulcer(s) on the trunk or pelvis.
5. Recent myocutaneous flap or skin graft for a pressure ulcer on the trunk or pelvis (surgery within the past 60 days).
6. The individual has been on a group 2 or 3 support surface immediately prior to a recent discharge from a hospital or nursing facility (discharge within the past 30 days).

Proactive Measures Include:
• Good nutrition
• Clean and dry linens
• Frequent turning and repositioning of immobilized individuals
• Providing soft padding in wheelchairs and beds to reduce pressure
• Keeping the skin clean and dry