THE INTERVENTIONAL PATIENT HYGIENE COMPANY

Born from a core belief in prevention, Interventional Patient Hygiene is a nursing action plan focused on fortifying patients' host defenses with evidence-based care.

By promoting a return to the basics of nursing care, our advanced patient hygiene products and programs help healthcare facilities improve clinical outcomes by reducing the risk of hospital-acquired infection and skin breakdown.

Visit our FREE Clinical Education Website!
www.sageproducts.com/education

Sage’s unique site provides FREE information that can help your facility improve care—including Performance Improvement Plans, Evidence-Based Protocols, Clinical Studies, Customizable Posters and more!

Customizable Programs For:
- Reducing HAP/VAP Risk Factors
- Reducing Threats to Skin Integrity
- Preventing Incontinence-Associated Dermatitis (IAD)
- Preventing Heel Pressure Ulcers
- Reducing an SSI Risk Factor
Simple Interventions. Extraordinary Outcomes.

NEW

SACRAL PROTECTION
PRODUCT CATALOG

HELPS PROTECT PATIENTS AND STAFF!
- Helps prevent patient pressure ulcers by offloading the sacrum.
- Controls skin microclimate.
- Stays under patient to enhance turning protocol compliance.
- Protects healthcare workers from back, wrist & shoulder injuries.

Made in USA

SAGE PRODUCTS INC
A pressure ulcer is defined as a “localized injury to skin and/or underlying tissue, usually over a bony prominence as a result of pressure, or pressure in combination with shear.”

The cost to treat a pressure ulcer can range from $2,000 to $70,000 depending on the stage of the ulcer.

According to the National Pressure Ulcer Advisory Panel, hospital prevalence of pressure ulcers is 14%-17%, and incidence is 7%-9%. Sacral pressure ulcers are the most common, accounting for about 37% of all pressure ulcers.

Incontinence moisture is a risk factor for sacral pressure ulcers. In a study of acute care patients in medical, surgical and intensive care units, the overall prevalence of incontinence was 19.7%. Some type of skin injury was seen in 42.5% of patients who were incontinent.

**RISK FACTORS**
- Reduced mobility or immobility
- Moisture
- Friction and shearing
- Acute illness
- Extremes of age
- Vascular disease
- Level of consciousness

**SACRAL PRESSURE ULCERS PREVALENCE, RISK AND COST**

**REFERENCES**
STAFF INJURY RISK
TURNING AND REPOSITIONING

While frequent turning and repositioning of patients is critical to preventing sacral pressure ulcers, it can be extremely challenging for staff. It can be physically demanding and require considerable nursing time.

Manual lifting and other tasks involving repositioning patients are associated with increased risk of pain and injury to staff, particularly to the back. Turning and repositioning puts staff at risk for musculoskeletal disorders (MSDs), which include conditions such as low back pain, sciatica and rotator cuff injuries.

PREVALENCE & COST

- In 2009, nurses aides, orderlies and attendants suffered a total of 25,160 MSDs. 59.2% of these were back injuries requiring an average of 5 days off work. 12.2% were shoulder injuries with an average of 8 days off work.

- Registered nurses suffered a total of 10,480 MSDs in 2009.

- Nurse back injuries cost an estimated $16 billion annually in worker’s compensation benefits. Medical treatment, lost work days, light duty and employee turnover cost an additional $10 billion.

In a survey of more than 900 clinicians, 89% said they or a co-worker have experienced a back, shoulder or wrist injury due to turning or boosting a patient. More than 80% said there is room for improvement in compliance to their facility’s turning and repositioning protocol.
PREVALON® TURN AND POSITION SYSTEM
PATIENT AND STAFF BENEFITS

Turning and repositioning patients according to your facility’s turning schedule is critical to preventing pressure ulcers. Current methods have multiple challenges, including lack of nursing time and risk of staff injury.

Unlike standard lift slings and plastic slide sheets, the Prevalon Turn and Position System stays under the patient at all times. It’s always ready to assist with turning, repositioning and boosting the patient. This convenience and efficiency makes it possible for nurses and staff to achieve compliance to a q2° turning protocol. Additionally, slings and other turning devices require patient rolling and tucking every time, just to get them under the patient and ready for use. This can cause additional stress on the patient. The Prevalon Turn and Position System stays under the patient to minimize additional stress.

PATIENT BENEFITS
- Helps prevent sacral pressure ulcers by offloading the sacrum.
- Manages moisture due to incontinence and other conditions.
- Helps minimize friction and shear on the patient.
- Creates an optimal microclimate for the skin.
- Easily turns any patient up to 350 pounds.
- Keeps patient positioned at the appropriate angle.

STAFF BENEFITS
- Nurse-friendly system helps staff more easily follow best practice prevention guidelines.
- Requires fewer nurses and less time to turn.
- Reduces the force needed to turn and boost patients. Less nursing time required.
- Decreases strain on staff’s backs, wrists and shoulders.
- Stays under patient at all times, making it easier and more convenient for nurses to comply with a q2° turning protocol.

Sacrum

Helps prevent sacral pressure ulcers by completely offloading the sacrum.
GUIDELINES: REPOSITIONING

EUROPEAN PRESSURE ULCER ADVISORY PANEL (EPUAP) AND NATIONAL PRESSURE ULCER ADVISORY PANEL (NPUAP)¹

1.1 Repositioning should be undertaken to reduce the duration and magnitude of pressure over vulnerable areas of the body.

1.2 The use of repositioning as a prevention strategy must take into consideration the condition of the patient and the support surface in use.

3.2 Avoid subjecting the skin to pressure and shear forces.

3.6 Repositioning should be undertaken using the 30-degree tilted side-lying position (alternately, right side, back, left side) …

WOUND OSTOMY AND CONTINENCE NURSES SOCIETY (WOCN)²

III. Interventions: Prevention

A. Reducing Risk of Developing Pressure Ulcers

- Minimize friction and shear.
- Use 30-degree side lying position (alternating from the right side, the back and left side) to prevent pressure, sliding and shear-related injury.
- Minimize Pressure.
- Schedule regular repositioning and turning for bed and chair bound individuals.

B. Managing Incontinence

- Select underpads...that are absorbent to wick incontinence moisture away from the skin.

I. Education

- Educate patients, caregivers, and health care providers involved in the continuum of care about prevention, treatment and factors contributing to recurrence of pressure ulcers. Areas to be addressed should include: ... positioning and use of support surfaces.

HARTFORD INSTITUTE FOR GERIATRIC NURSING (HIGN)³

- Use a 30-degree lateral side lying position; do not place client directly on their trochanter.
- Protect high-risk areas such as elbows, heels, sacrum, back of head from friction injury.

REGISTERED NURSES ASSOCIATION OF ONTARIO (RNAO)⁴

For individuals restricted to bed:

- Reposition at least every 2 hours or sooner if at high risk.
- A 30-degree turn to either side is recommended to avoid positioning directly on the trochanter.


TOOLS & PROGRAMS

STOP SACRAL PRESSURE ULCERS & HEALTHCARE WORKER INJURIES—OPPORTUNITY CALCULATOR

This unique tool from Sage estimates the number of pressure ulcers, dollars and length of stay days attributable to sacral pressure ulcers. It helps measure staff injury costs and missed work days in connection with healthcare worker injuries. In addition, it quantifies the potential impact of patient turning and positioning interventions.

WE CAN HELP YOU MEASURE PRESSURE ULCER PREVALENCE & INCIDENCE ON YOUR HIGH-RISK UNITS.

Sage’s CustomerOne™ program provides customized measurement and analysis, and then compiles your results into valuable, actionable reports that can be shared with other decision-makers in your facility.

To learn more about these tools, call 1-800-323-2220
MICROCLIMATE BODY PAD
This innovative, disposable body pad is placed under the patient to manage heat and moisture.
- Only full-body size available. Provides microclimate control to all skin contact areas.
- Highly breathable materials allow air flow to patient skin, reducing heat and moisture buildup.
- Super-absorbent fill materials absorb large amounts of moisture due to incontinence and other conditions. Pull moisture away from the skin and prevent it from soiling the Glide Sheet and mattress.

LOW-FRICTION GLIDE SHEET
The Low-Friction Glide Sheet remains in place under the patient throughout the length of stay.
- Low-friction ripstop nylon requires less effort to move the patient.
- Full-length, high strength handles allow multiple clinicians to easily grab and position the sheet at the same time.
- Anti-shear strap reduces shear and minimizes patient repositioning and boosting.
- Highly breathable materials allow air flow to patient skin, reducing heat and moisture buildup.
- Comfort grip material keeps the body pad in place under the patient.
- Torso body length accommodates most patient sizes from shoulders to knees.
- Quick-release attachment allows easy removal for patient transfer.
- Universal bed attachment compatible with all hospital beds.

30-DEGREE BODY WEDGES
Soft foam wedges allow staff to easily position patients for consistent protection and pressure redistribution.
- Comfort grip material keeps body wedges in place under the patient.
- Soft, dense support foam material redistributes pressure for patients up to 350 pounds.
- Low-friction surface requires less effort to move patients, minimizes potential for staff injuries.
- Two wedges per system provides customized placement for most patient body sizes.

EASY COMPLIANCE

Place Prevalon Turn and Position System under patient.

Position 30-Degree Body Wedges to offload the sacrum.
The innovative Microclimate Body Pad has four layers to effectively absorb and lock in moisture while allowing air to flow through.

30-Degree Wedges placed on the mattress easily position patient at appropriate angle to offload the sacrum.

COMPATIBLE WITH ALL LOW AIR LOSS MATTRESSES
For single patient use. Do not launder.

1. Position 30-Degree Wedges to offload the sacrum.
2. Pull handles to turn patient.
PREVALON® TURN AND POSITION SYSTEM
Helps protect patients and staff!

Tests show that Prevalon Turn and Position System requires 71% less effort to turn a patient than a standard draw sheet and pillows.*


- Compatible with all low air loss mattresses.
- Easier to turn and position patients. Requires less force than traditional draw sheets and pillows.
- Decreases nursing time required for turning and repositioning patients.
- Reduces risk of injury to staff’s backs, shoulders and wrists.
- Improves compliance to turning/repositioning protocol.

PRODUCT ORDERING:

PREVALON® TURN AND POSITION SYSTEM
1 Low-Friction Glide Sheet
1 Microclimate Body Pad
1 Universal Bed Attachment
1 Anti-Shear Strap
2 30-Degree Body Wedges
5 systems/case Reorder #7200

MICROCLIMATE BODY PAD
30 pads/case (6 bags of 5) Reorder #7250

www.sageproducts.com
ANOTHER PART OF YOUR COMPLETE PRESSURE ULCER PREVENTION PROGRAM

PREVALON® PRESSURE-RELIEVING HEEL PROTECTOR

Minimize pressure, friction and shear on the feet, heels and ankles of non-ambulatory patients.

- **Prevent and treat heel ulcers.** Prevalon completely off-loads the heel, delivering total continuous pressure relief.

- **Prevent plantar flexion contracture.** Contracture Strap maximizes support under the foot, helping prevent Achilles tendon shortening by maintaining the foot at 90° while the patient is in bed.

- **Prevent foot drop.** Foot and Leg Stabilizer Wedge helps prevent lateral foot and leg rotation, reducing the risk to the peroneal nerve.

REFERENCES:
1. GHX Trend Report (Dollars), 3rd Quarter, 2010 Hospital. Annualized market based on 4th quarter figure.