

# **EQUIPMENT**EDUCATION





(210) 612-4343

newwaymedicalsupply.com

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## Oxygen

#### **Oxygen Concentrator**



#### **What You Need to Know About Your Therapy**

Make sure to leave your concentrator oxygen level at the prescribed level from your doctor. **DO NOT** change the liter flow set without consulting with your doctor.

#### Getting Started with Your Oxygen Concentrator

#### **Placement**

- The concentrator should be placed where the alarm can be heard by the patient and/or caregiver at all times
- Keep the concentrator at least 5 feet away from any heat source, such as a heater, radiator, fireplace, etc.
- Keep the concentrator in a well-ventilated area at least 12 inches away from anything that
  might block the airflow (drapes, bedspread, etc.) DO NOT place the concentrator in a closet or
  other confined space.
- Place the concentrator close to a properly grounded electrical outlet. It is better to not use
  extension cords. If necessary, use only heavy-duty extension cords.

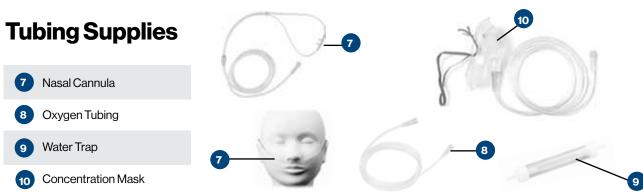
#### Concentrator Operation

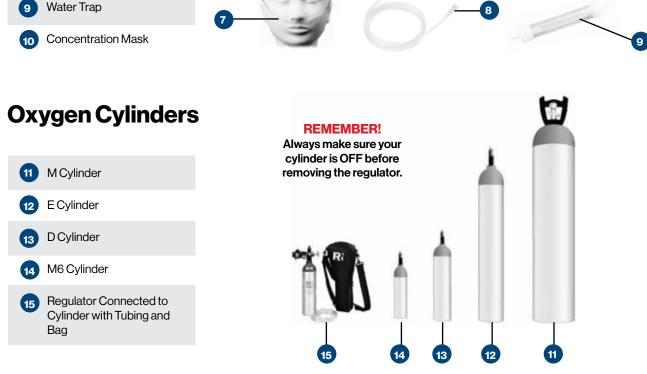
- 1. Turn power switch to the ON position. You should hear a short alarm when the concentrator is first turned on. This is normal. If the alarm continues or occurs at times other than when the unit is first turned on, refer to the Troubleshooting Guide section on page 6.
- 2. Attach a nipple adapter to the concentrator's outlet, if necessary. Be careful not to cross-thread the connection. If you are using a bubble humidifier, it is necessary to attach an adapter to the concentrator's outlet. Simply fill the humidifier (Use Distilled Water Only!) to the maximum line with water and attach it to the concentrator's outlet. Be careful not to cross thread the connection.
- Attach the extension tubing and nasal cannula or mask to the nipple adapter outlet or the humidifier's outlet if a humidifier is used.
- **4.** Adjusting the liter flow setting: As instructed by your representative, Per Physician's prescribed liter flow, adjusting the flow control knob on the concentrator while at eye level with the flowmeter, so that the ball is centered on the line for the correct liter flow setting.
- **5.** To begin using your oxygen, simply place the nasal cannula or mask into the proper position.
- 6. Always turn OFF your concentrator when not in use.



If you have a needle-type gauge: turn the flow adjustment knob until the needle points to your doctor-prescribed setting.

If you have a rotary or click-type flowmeter: rotate the dial until the physician-prescribed liter flow setting appears. Your cylinder is now ready to use. Put on your cannula or mask as instructed by your representative.





**IMPORTANT!** When you are finished with your cylinder, turn the cylinder OFF by first turning the cylinder wrench or cylinder valve clockwise until snug. After the pressure on the regulator drops to "zero" (or after the remaining oxygen escapes from the regulator), then you may turn off the flow control knob on the regulator.



## Troubleshooting Guide

| Problem                                                            | Possible Cause                                                      |               | What to Do                                                                                                                                                                                                                  |  |  |  |
|--------------------------------------------------------------------|---------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Alarm sounds                                                       | No power to concentrator -                                          |               | Check electrical plug. Check fuse or circuit breaker. Make sure the outlet is not controlled by a light switch. Push RESET button, if present. If problem continues, call us at (210) 612-4343 and switch to backup system. |  |  |  |
| No flow                                                            | Kink in tubing                                                      | $\rightarrow$ | Straighten or replace tubing.                                                                                                                                                                                               |  |  |  |
| (put end of nosepiece in a cup of water to make sure               | Tubing is disconnected                                              | $\rightarrow$ | Reconnect tubing.                                                                                                                                                                                                           |  |  |  |
| there is no flow; a steady flow of bubbles should be seen          | Humidifier is cross-threaded                                        | $\rightarrow$ | Disconnect humidifier from concentrator outlet, and recornect without cross-threading.                                                                                                                                      |  |  |  |
| when oxygen is present)                                            | Concentrator power is off                                           | $\rightarrow$ | Turn concentrator power switch to ON position.                                                                                                                                                                              |  |  |  |
|                                                                    | Machine is malfunctioning                                           | $\rightarrow$ | Call us at (210) 612-4343 and switch to the backup system.                                                                                                                                                                  |  |  |  |
| Flowmeter won't adjust                                             | Kink in tubing →                                                    |               | Straighten or replace tubing.                                                                                                                                                                                               |  |  |  |
|                                                                    | Humidifier is clogged                                               | $\rightarrow$ | Replace humidifier or remove humidifier and connect directly to the concentrator. Use distilled water only.                                                                                                                 |  |  |  |
| Machine turns off by itself                                        | Dirty filters →                                                     |               | Clean or replace filters.                                                                                                                                                                                                   |  |  |  |
|                                                                    | Machine malfunction                                                 | $\rightarrow$ | Call us: (210) 612-4343                                                                                                                                                                                                     |  |  |  |
| Yellow alarm light<br>comes on<br>(not present on<br>all machines) | Possible malfunction                                                | $\rightarrow$ | Call us at (210) 612-4343. Change to backup system if light does not turn off in 20 minutes.                                                                                                                                |  |  |  |
| Red alarm light<br>comes on<br>(not present on<br>all machines)    | Machine malfunction                                                 | $\rightarrow$ | Call us at (210) 612-4343. Switch to backup system.                                                                                                                                                                         |  |  |  |
| Water in supply tubing                                             | Some condensation is normal, but may block the flow of your oxygen. | $\rightarrow$ | If necessary, replace the supply tubing. Try using less water in humidifier. Keep tubing elevated off of the floor. Contact us at (210) 612-4343. Representative may make adjustments.                                      |  |  |  |



## **Cleaning/Replacement Schedule**

| Frequency                                      | Supplies                                                                              |               | What to Do                                                                                                                                                       |
|------------------------------------------------|---------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Every week                                     | Humidifier bottle and in-line<br>water trap (if used)<br>Concentrator cabinet filters | $\rightarrow$ | Clean with warm, soapy water. Rinse and soak for 30 minutes in 1 part vinegar to 3 parts water solution. Rinse well, place on paper towel, and allow to air dry. |
| Every month or as Nasal cannula or mask needed |                                                                                       | $\rightarrow$ | Discard and replace. Keep stored in a clean, plastic bag when not in use.                                                                                        |
|                                                | Extension tubing connectors (if using a humidifier bottle)                            | $\rightarrow$ | Discard and replace.                                                                                                                                             |
|                                                | In-line water trap (if used)                                                          | $\rightarrow$ | Discard and replace.                                                                                                                                             |
|                                                | Humidifier bottle (if used)                                                           | $\rightarrow$ | Discard and replace.                                                                                                                                             |
| Every 3 months                                 | Extension tubing, tubing connectors (if not using humidifier bottle)                  | $\rightarrow$ | Discard and replace.                                                                                                                                             |



| Continuous Flow (Rates in Hours:Minutes)     |             |         |       |         |       |         |       |       |       |       |
|----------------------------------------------|-------------|---------|-------|---------|-------|---------|-------|-------|-------|-------|
| Cylinder Size                                | O2 Capacity | 0.5 LPM | 1 LPM | 1.5 LPM | 2 LPM | 2.5 LPM | 3 LPM | 4 LPM | 5 LPM | 6 LPM |
| M-6                                          | 164 Liters  | 03:46   | 02:42 | 01:48   | 01:24 | 01:06   | 00:54 | 00:42 | 00:36 | 00:18 |
| D                                            | 415 Liters  | 13:49   | 06:54 | 04:36   | 03:30 | 02:48   | 02:18 | 01:42 | 01:24 | 01:09 |
| E                                            | 682 Liters  | 22:44   | 10:57 | 07:34   | 05:41 | 04:32   | 03:47 | 02:50 | 02:18 | 01:53 |
| М                                            | 1724 Liters | 57:27   | 28:43 | 19:09   | 14:21 | 11:29   | 09:34 | 07:10 | 05:45 | 04:47 |
| Conservation 3 to 1 (Rates in Hours:Minutes) |             |         |       |         |       |         |       |       |       |       |
| M-6                                          | 164 Liters  |         | 10:00 |         | 06:24 |         | 04:48 | 03:54 | 03:12 |       |
| D                                            | 415 Liters  |         | 25:06 |         | 16:00 |         | 12:06 | 09:48 | 08:00 |       |
| E                                            | 682 Liters  |         | 40:30 |         | 25:48 |         | 19.6  | 15:48 | 12:54 |       |



## **Important Safety Reminders**



**DO NOT** change flow settings unless instructed by your doctor.



**DO NOT** place concentrators or tanks in enclosed areas.



Keep oxygen equipment at least 5 feet away from all heat sources, such as radiators, fireplaces, etc.



**AVOID THE USE** of the following items while oxygen is in use:

- a. Oil or petroleum -based products (Vaseline, certain cosmetics or lotions)
- b. Aerosol sprays (hair spray, spray paint, etc.)
- c. Electrical items that might spark (electric razors, electric blankets, hair dryers, heating pads, etc.)



Place the concentrator close to a properly grounded outlet WITHOUT multiple devices on a single outlet.



**REMINDER:** Oxygen is not flammable but is combustible. Oxygen causes flammable items to catch fire more easily and burn faster and hotter. **KEEP ALL OPEN FLAMES AWAY.** 



**DO NOT SMOKE** while using your oxygen!

- $a. \quad Smoking \ with your \ oxygen \ on \ could \ lead \ to \ property \ damage, severe \ personal \ injury \ or \ even \ death.$
- b. If you decide to smoke, you will need to wait at least 30 minutes after turning off your oxygen.
- c. If possible, smoke away from your oxygen equipment in another room or outside.

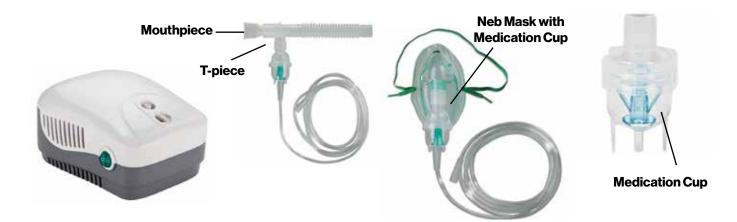


We recommend that you have properly-working smoke detectors and fire extinguishers in your home in case of emergencies.



If an alarm is present on your machine, be sure you are able to hear the alarm so that you may respond if it becomes necessary to take corrective actions.

## **Nebulizers**



#### **Getting Started with Your Small Volume Nebulizer Assembly**

#### Before Taking Your Treatment

- 1. Wash your hands, and gather everything you will need:
  - a. Nebulizer circuit: includes medication cup, tubing, mouthpiece and T-piece. NOTE: Some T-pieces are attached to the mouthpiece.
  - **b.** Nebulizer compressor (the machine)
  - **C.** Medication
  - **d.** If you are to use a special mask to take your treatments, your New Way Medical Supply Representative will instruct you on how to use the mask.
- 2. Attach one end of the tubing, if required, to the compressor, and the other end to the nebulizer cup's stem.
- 3. Add the medication to the nebulizer cup, and attach the lid to the cup.
- 4. Attach T-piece and mouthpiece to the nebulizer.
- **5.** You are now ready to begin treatment.

#### How to Take Your Treatment

- 1. If possible, it is best to sit in an upright position to take your treatments.
- 2. If required, plug the compressor's power cord into a properly-grounded electrical outlet.
- 3. Turn the power switch to the ON position.
- 4. Place your lips tightly around the nebulizer's mouthpiece.
- 5. Breathe in slowly and deeply through your mouth only.
- **6.** Then, breathe out slowly through the nebulizer mouthpiece. You do not have to remove the mouthpiece from your mouth to exhale.
- 7. Every few breaths, take in a slow, deep breath, and HOLD it for a few seconds before exhaling. This will allow the medication to settle in your lungs.
- **8.** Continue the treatment until the medication is gone (usually about 10 minutes), or unless otherwise instructed.
- **9.** If you feel dizzy or shaky, or you feel your heart racing, stop the treatment for a few minutes and rest. Usually these feelings will go away within a few minutes so you can finish your treatment. If they continue, contact your physician. **NOTE**: You may need to cough during and after the treatment to remove any loosened secretion.
- 10. When finished with your treatment, turn your unit OFF.
- **11.** Take nebulizer cup to the sink for cleaning. (under Cleaning/Replacement Schedule on page 9).



## **Cleaning/Replacement Schedule**

| Frequency            | Supplies                                        |               | What to Do                                                                                                                                                                                                                                                                                                    |
|----------------------|-------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| After each treatment | Mouthpiece or mask<br>T-piece<br>Medication cup | $\rightarrow$ | Take apart the nebulizer set, and rinse the mouthpiece,<br>T-piece, and medication cup with clear water. Let the pieces<br>dry between two clean paper towels until the next treatment.<br><b>DO NOT</b> try to clean the tubing.                                                                             |
| Every day            | Mouthpiece or mask<br>T-piece<br>Medication cup | <b>→</b>      | Wash the mouthpiece, T-piece, and medication cup with warm soapy water, and rinse well. Soak the pieces for 30 minutes in a solution of 1 part vinegar and 3 parts water. Rinse the pieces very well in warm, clean, clear water. Let the pieces dry between two clean paper towels until the next treatment. |
| Every week           | Compressor                                      | $\rightarrow$ | Make sure compressor is unplugged, and wipe the outside of the compressor with a damp cloth.                                                                                                                                                                                                                  |
| Every two weeks      | Nebulizer circuit                               | $\rightarrow$ | Replace your nebulizer circuit with a new one.                                                                                                                                                                                                                                                                |
| At least monthly     | Air inlet filter                                | $\rightarrow$ | Check the air inlet filter. Clean or change the filter as instructed by your representative. Obtain filters from the local branch office.                                                                                                                                                                     |

Note: Any other maintenance should be completed by authorized service centers.



## **Important Safety Reminders**

- 1. DO NOT change treatment dosage without asking your doctor. Please notify New Way Medical Supply of any changes.
- 2. If you feel dizzy or shaky, or you feel your heart racing during your treatment, stop and rest. If these feelings continue, call your doctor.
- 3. DO NOT allow the vents on the compressor to be blocked by papers, tablecloths, curtains, etc. Keep the area clear.
- 4. It is better not to use extension cords. If necessary, use only heavy-duty extension cords.
- **5. DO NOT** operate multiple devices from a single outlet.
- 6. Unplug the compressor before cleaning.
- 7. If you have a medical emergency, contact your doctor or emergency personnel.



## **Troubleshooting Guide**

| Problem                                                            | Possible Cause                                                                                                                                                                                 |               | What to Do                                                                                                                                                                     |
|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Compressor<br>will not operate                                     | <ul> <li>Power cord not plugged in</li> <li>No power to outlet</li> <li>Power switch not in the ON position</li> <li>Equipment malfunction</li> </ul>                                          | $\rightarrow$ | <ul> <li>Plug unit into electrical outlet.</li> <li>Change to a different outlet.</li> <li>Turn switch to ON position.</li> <li>Call us at (210) 612-4343.</li> </ul>          |
| Machine is operating,<br>but little or no mist is<br>being created | <ul> <li>Tubing kinked or loosely connected</li> <li>Nebulizer not held in upright position</li> <li>Filter needs to be replaced or cleaned</li> <li>Nebulizer is clogged or broken</li> </ul> | $\rightarrow$ | <ul> <li>Straighten tubing. Tighten connection.</li> <li>Place nebulizer in upright position.</li> <li>Clean and/or replace filter.</li> <li>Replace nebulizer cup.</li> </ul> |

## **Suction Units**



#### **Getting Started with Your Suction Unit**

#### Setup

- 1. Connect either end of the connection tubing (item #7) to the top of the collection bottle connector then connect the other end to the bacteria filter or male adapter on the suction unit.
- The patient tubing should be connected to the collection bottle at the outlet labeled (patient). Please assure that all connections are secure and without leaks before using.

#### How to Operate Your Suction Unit

- 1. Before use, check the specification label on the side of the suction unit to ensure that the voltage and current indicated on the unit corresponds with the voltage and current available. Make sure the power switch located on the side of the unit is in the "O" position (OFF) before connecting the unit to a power source.
- 2. Switch the power switch to the "I" position (ON), the unit will start running.
- 3. Adjust the vacuum level from 0 to 520 mm Hg by turning the vacuum adjust knob (clockwise) to increase vacuum levels, and counter-clockwise to decrease vacuum level. Referring to the vacuum gauge while setting the desired level of vacuum. To accurately read the gauge, block the patient end of the hose or cap off the collection bottle and allow the gauge to reach a stable vacuum reading.
- Place the patient tubing to the appropriate position for the patient and start suctioning the sputum.
- **5.** When the sputum reaches the safe full level (about 2/3 full) of the collection bottle, please switch the suction machine to the "O" position (OFF).
- 6. Remove the sputum from the collection bottle after the suction machine has been shut off.
- Reconnect the collection bottle and switch the unit to the "I" position (ON) to start suctioning again.

## **Intermittent Suction Units**



#### **Getting Started with Your Intermittent Suction Unit**

#### Setup

Connect the end of the connection tubing (item #6) to the top of the suction canister connector then connect the other end to the bacteria filter on the suction unit.

#### How to Operate Your Intermittent Suction Unit

- 1. Before use, check the specification label on the side of the suction unit to ensure that the voltage and current indicated on the unit corresponds with the voltage and current available. Make sure the power switch (located on the front of the unit) is in the "O" position (OFF) and that the selector knob (located on the front of the unit) is in the "OFF" position before connecting the unit to a power source.
- **2.** Plug the suction unit into the electrical outlet. Switch the power to the "I" position (ON), the unit will start running. Turn the selector knob to the "REG" position.
- **3.** Block the patient connection on the suction canister and adjust the vacuum control knob to the desired vacuum.
  - a. To INCREASE vacuum, turn the knob CLOCKWISE.
  - **b.** To **DECREASE** vacuum, turn the knob **COUNTERCLOCKWISE**.
  - C. NOTE: Intermittent cycle starts in the OFF phase, therefore a delay occurs before the ON (suction) cycle begins.
- **4.** Turn the selector knob to the "INT" position to obtain an intermittent, adjustable vacuum that cycles on and off.
- **5.** Connect one end of the patient suction tubing to the port on the canister marked patient tubing.
- **6.** Connect the other end of the patient suction tubing to the suction catheter and begin suctioning as instructed by the healthcare provider. **DO NOT** overfill the canister.
- 7. When the procedure is completed, press the ON/OFF switch to the "OFF" position.
- **8.** Empty the suction canister as follows:
  - a. Disconnect all suction tubing.
  - b. Remove the canister from its bracket and empty as instructed by your physician or healthcare professional.
  - **C.** Replace suction canister and reconnect all suction tubing.
- **9.** You are now ready to start the suctioning procedure again.



# **Suction & Intermittent Suction Cleaning & Maintenance**

| Action Item               | What to Do                                                                                                                                                                                                                                                                                |  |  |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Clean Collection Bottle   | <ol> <li>Turn off the suction unit and allow vacuum to drop, then disconnect AC power<br/>source.</li> </ol>                                                                                                                                                                              |  |  |
|                           | 2. With the collection bottle still in the holder, remove the collection bottle lid. The bottle can now be taken out of the holder to be emptied (Collection bottle should be emptied after each use).                                                                                    |  |  |
|                           | 3. Collection bottle should be thoroughly cleaned after each use by one of the following methods:                                                                                                                                                                                         |  |  |
|                           | <b>a.</b> Wash in hot water/dish washing detergent solution and rinse with clean, hot tap water. Then wash in 1 part vinegar to 3 parts hot water solution. Rinse with hot tap water and air dry.                                                                                         |  |  |
|                           | <b>b.</b> Wash with rubbing alcohol and air dry.                                                                                                                                                                                                                                          |  |  |
|                           | Wash with a commercial (bacterial germicidal) disinfectant, follow disinfectant<br>manufacturer's recommended instructions and dilution rates carefully.                                                                                                                                  |  |  |
| Clean Suction Unit        | 1. Disconnect the suction unit from all external power sources.                                                                                                                                                                                                                           |  |  |
| and Collection Bottle Lid | 2. Wipe the suction unit housing and collection bottle lid with a clean cloth and any commercial (bacterial-germicidal) disinfectant.                                                                                                                                                     |  |  |
| Clean Tubing              | 1. Disconnect the tubing from the unit.                                                                                                                                                                                                                                                   |  |  |
| · ·                       | 2. Tubing should be rinsed thoroughly after every use by running hot tap water through it followed by a solution of 1 part vinegar to 3 part hot water.                                                                                                                                   |  |  |
|                           | 3. Rinse with hot water and air dry.                                                                                                                                                                                                                                                      |  |  |
|                           | 4. Keep the outer surface of the tubing clean by wiping with a clean, damp cloth.                                                                                                                                                                                                         |  |  |
| Maintenance               | Inspect suction tubing and collection bottle for leaks, cracks, etc. before each use. Do not attempt to open or remove suction cabinet. If serviced required, please return to provider. Bacteria filter should be replaced as needed. If overflow occurs, change the filter immediately. |  |  |



## Troubleshooting Guide

| Problem               | Action                                                                                                                                                                                                                        |
|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Unit Does Not Turn On | <ul> <li>Check power source and connection.</li> <li>Ensure that the wall outlet is live.</li> <li>Check the power cord is not damaged.</li> </ul>                                                                            |
| Motor Runs, No Vacuum | <ul> <li>Verify tubing connection security.</li> <li>Check for leaks or tubing kinks.</li> <li>Ensure that the float shut-off under the canister lid is not activated.</li> <li>Check for bottle leaks and cracks.</li> </ul> |
| Low Vacuum            | <ul> <li>Use the vacuum adjust knob to increase vacuum level.</li> <li>Check system for leaks.</li> <li>Adjust vacuum adjust knob and release.</li> </ul>                                                                     |

## **Feeding Pumps**



#### **Introduction to Enteral Feeding Pumps**

Enteral nutrition through a feeding tube is the preferred method of nutrition support in patients who have a functioning gastrointestinal tract but who are unable to be fed orally. This method of delivering nutrition is also commonly used for administering medications when patients cannot swallow safely.

#### Overview

- 1. Before beginning use of an enteral feeding pump, be sure to have all your supplies.
  - a. Enteral feeding pump
  - **b.** Pump set (feeding container and tubing)
  - **c.** Formula (must be kept at room temperature)
  - **d.** IV Pole (for mounting the pump)
  - e. Optional: latex gloves, syringe, and water
- 2. Prepare the patient in a relaxed position and adjust area for access to the patient.
- 3. Mount the enteral feeding pump on the IV pole and plug into the wall outlet.
- **4.** Take the pump set out of the package and hang the bag/container on the IV pole hook. Open the feeding set by unclamping an/or uncapping the feeding set.
- **5.** Prep the pump set by priming the line (depending on the style pump this varies) and make sure the set is run through the pump.
- 6. Set the desired settings on the pump. (Flow rate, dose, volume to be delivered, and/or flush)
- 7. Connect the feeding set to the patient and start the pump.
- 8. When disconnecting the patient from the set make sure to clamp the tube and/or cap the line.

#### Additional Information

- The prescribed flow and hours of use are to be determined by the patient's healthcare professional.
- 2. The technician will review the setting of the rate, dose, hold, volume to be delivered, and clear volume functions. If additional information is requested, contact the appropriate representative (nurse/caregiver/or dme provider).
- **3.** If an alarm is set off, please consult your representative.
- 4. Replacement schedule of the feeding bag is determined by the healthcare professional. The delivery representative will demonstrate the proper installation of the feeding bags.
- 5. The enteral feeding pump needs to be kept clean in order to ensure the pump is running correctly without any false alarms.

## **Full Electric Hospital Beds**

#### **General Information**

You have been supplied with a hospital bed. It is important to follow all instructions carefully. Neither the service representative, the distributor, nor the manufacturer assumes any liability concerning the effectiveness of safety of this equipment or for the improper operation of this equipment. Patient and caregivers that will operate equipment should participate in training. No one else should operate equipment.



**NOTE:** Should the equipment malfunction for any reason, call your representative to correct the problem or replace the equipment.

## Patient/Caregiver Will Demonstrate

- **1.** Use of hand cranks (manual bed), patient controls (electric bed) or combination of both (semi-electric bed) to effect proper positioning of patient.
- **2.** Use of emergency crank in event of power outage or motor failure in an electric or semielectric bed.
- **3.** If applicable, proper positioning and use of side rails. Emphasize need to always keep side rails up when patient is in bed to prevent falls.
- 4. Use of wheel locks to prevent movement of bed during use.
- **5.** Understanding the importance of not using side rails to pull patient into position, discuss potential for breakage of rails.



## Safety/Maintenance



Discuss need to always check equipment for proper function to ensure safety.



Demonstrate potential hazards of equipment: i.e., pinch points, detachment of rails, breakage of rails, need to lock wheels to prevent rolling of bed, need to keep rails up, etc.



Emphasize need to keep bed and mattress clean and sanitary.



Emphasize importance of notifying the representative in the event of malfunction or faulty parts on unit.



Ensure that patient and caregivers have information necessary to contact if indicated (telephone numbers, addresses, etc.).



Precautions in case of an emergency.

## **Low Air Loss Mattress**

## **General Information**

A low air loss mattress is used to reduce or relieve pressure that the weight of your body, and especially your bones, exert on your skin as it presses against the surface of a bed. By relieving or reducing this pressure, existing pressure ulcers can heal and the chance that new pressure ulcers will develop can be reduced. Patient and caregivers that will operate equipment should participate in training. No one else should operate equipment.

**NOTE:** Should the equipment malfunction for any reason, call your representative to correct the problem or replace the equipment.





## Safety/Maintenance



**IMPORTANT TO NOTE:** Even if a specialty bed is being used, the patient still needs to be repositioned at least every two hours.



**NOTE ABOUT CONTROLLING MOISTURE:** If you have an incontinence issue, these beds help intact skin "dry", which keeps the skin around the pressure ulcer from breaking down and prevents the development of additional pressure ulcers. When lying on these types of support surfaces, it's important not to wear incontinence briefs (because they block the airflow to the skin). Instead, follow the manufacturer's instructions for using linen and under pads.



**PATIENT TRANSFERS IN AND OUT OF BED:** Always secure bed before patient transfer. If available, engage locks on the bed casters before transferring patient. Turning up the comfort dial to the maximum setting to firm the system will also assist in making transfers easier.



**BED LINENS:** This device incorporates a waterproof cover that is moisture vapor permeable; therefore, it is recommended to limit bed linens to one sheet in order to maximize the system's performance. NOTE: Only "breathable" incontinent pads are recommended for use with this device. When using side rails and/or assisted devices, use a mattress thick enough and wide enough so that the gap between the top of the mattress and the bottom of the side rails and the gap between the side of the mattress and the side rails is small enough to prevent a patient from getting his or her head or neck between the mattress and the side rail. Failure to do so could result in serious patient injury or death.



**ROUTINE CLEANING WHILE IN USE BY A SINGLE PATIENT:** Routine cleaning of the air mattress can be done at bedside by cleaning with mild detergent or soap and water followed by drying with a clean dry cloth. Cover can be easily removed and laundered in warm water (113°F/45°C) with mild detergent. Tumble dry on lowest setting or hang dry when possible.



**PATIENT FALLS:** Failure to use bed rails in raised position could lead to accidental patient falls. Air mattresses have soft edges that may collapse when patients roll to that edge.

## **Hydraulic Patient Lifts**

#### **General Information**

You have been supplied with a hydraulic patient lift. It is necessary to follow all instructions carefully. Neither the service representative, the distributor, nor the manufacturer assumes any liability concerning the effectiveness or safety of this equipment or for the improper operation of this equipment. Patient and caregivers that will operate equipment should participate in training. No one else should operate equipment.

**NOTE:** Should the equipment malfunction for any reason, call your representative to correct the problem or replace the equipment.



## Patient/Caregiver Will Demonstrate

- 1. Attachment and proper adjustment of the chains/straps and sling according to manufacturer's operations manual(s).
- Lifting the patient with the patient lift; emphasize the need for proper seating position in the sling.
- 3. Rotation of the lift to allow placement of patient into chair. Lower sling into chair.
- 4. Release technique for sling
- 5. Return demonstration of complete operation of lift.



#### Safety/Maintenance



Always check equipment for proper function to ensure safety.



Potential hazards of equipment: i.e., weak points developing in sling, chain/strap improperly attached or adjusted, base frame not spread properly, patient out of safe center of gravity resulting in tipping, etc.



Proper cleaning/laundering of sling and other parts of unit in compliance with manufacturer's recommendations.



Emphasize importance of notifying the representative in the event of malfunction or faulty parts on unit.



Ensure that patient and caregivers have information necessary to contact the representative.

## **Wheelchairs**

#### **General Information**

You have been supplied a wheelchair for your use. It is necessary for you to follow all instructions carefully. Neither the service representative, the distributor, nor the manufacturer assumes any liability concerning the effectiveness or safety of this equipment or for the improper operation of this equipment. Patient and caregivers that will operate equipment should participate in training. No one else should operate equipment.

**NOTE:** Should the equipment malfunction for any reason, call your representative to correct the problem or replace the equipment.



## Patient/Caregiver Will Demonstrate

- **1.** Unfolding of wheelchair into usable position; demonstrate wheel locks (brakes) and note that they must be in place when patient enters and exits chair.
- 2. Removal and attachment of removable arms, if applicable.
- 3. Attachment of leg/foot rests, and how to swing away and lock them.
- 4. Seating of patient in chair and adjustment of foot plates.
- 5. Exit of patient from chair, using locks and transfer technique.
- **6.** Folding of chair for transport in vehicle or storage. If applicable, demonstrate or describe loading of chair into rear seat of automobile.



## Safety/Maintenance



Discuss need to check wheelchair for proper function to ensure safety.



Demonstrate potential hazards of equipment: i.e., loss of balance on curbs or ramps with resultant backward tipping, rolling of chair out from under patient when failing to set locks, pinch points, etc.



Discuss need to keep chair clean and protect from elements.



Emphasize importance of notifying the representative in the event of malfunction or faulty parts on unit.



Ensure that patient and caregivers have information necessary to contact the representative if needed.



Precautions in case of disaster.

## **Geri Chairs**



## Operation Information

- ALWAYS keep hands and fingers clear of moving parts to avoid injury.
- **DO NOT** use near an open flame or heat source, as all upholstery materials, even though treated with flame retardant, can ignite when exposed to open flame.
- Rear caster wheels MUST be locked during user transfer to or from recliner and while tilting and/or reclining or inclining (sitting up). Ensure that casters are free of debris.
- DO NOT enter or exit the recliner when footrest is elevated.
- DO NOT sit on the footrest when recliner is extended. The recliner will tip and bodily injury may occur.
- **DO NOT** push or pull footrest to position the recliner.
- **DO NOT** place hands or feet into any openings when adjusting the recliner. Attendant or care provider should always verify placement of user's hands and feet prior to adjusting the recliner. Failure to do so may result in serious bodily injury.

## General Guidelines

- Operation of recliner with missing or broken footrest or recline mechanism guards may result in bodily injury.
- **DO NOT** lift the recliner by the footrest. Lifting by means of the footrest may result in injury to the user and/or damage to the recliner.
- **DO NOT** attempt to stop the recliner with the wheel locks, while in motion. Wheel locks are not brakes.
- Before attempting to transfer in or out of the recliner, every precaution should be taken to reduce the gap distance. Turn the recliner toward the object you are transferring onto.
   When transferring to and from the recliner, ALWAYS engage both wheel locks. Special care MUST BE taken with people that have physical limitations which may require an assistant.
- **DO NOT** traverse, climb or go down ramps or slopes greater than 9°.

#### Recline Option Operated by an Attendant

- ALWAYS make sure that the recliner is stable before using the recline option.
- Make sure the patient is properly positioned in the recliner before reclining or inclining to maintain maximum stability and safety.
- When returning the occupant of the recliner to the full upright position, more body strength
  will be required for approximately the last twenty degrees of incline (sitting up). Make sure to
  use proper body mechanics (use your legs) or seek assistance to avoid injury.
- Physical limitations of a user and larger occupants of the recliner can present conditions that can injure the assistant. When in doubt, assure that additional assistants are present before operating the recline feature.

## **Walkaids**

#### **General Information**

You have been supplied with a walkaid. It is necessary to follow all instructions carefully. Neither the service representative, the distributor, nor the manufacturer assumes any liability concerning the effectiveness or safety of this equipment or for the improper operation of this equipment. Patient and caregivers who will use equipment will participate in the training. Caregiver purchasing equipment understands the importance of good training and supervision of patient using equipment.

**NOTE:** Should the equipment malfunction for any reason, call your representative to correct the problem or replace the equipment.



## Patient/Caregiver Will Demonstrate

- 1. Adjustable cane length and locking ring.
- 2. Quad cane length and left or right sided use; set screw/rings.
- 3. Proper use of walker for support.
- 4. Proper use of standard cane for support.
- **5.** Proper use of quad cane for support.
- **6.** Proper use of folding mechanism on folding walker; emphasize full locking to prevent accidents.
- **7.** Demonstrate other safety or use features of particular equipment, i.e., wheeled walkers, walker platform attachment, etc., as outlined by manufacturer.



## Safety/Maintenance



Always check equipment for proper function to ensure safety.



Potential hazards of equipment: i.e., loss of balance by over stepping or improper use, collapse of folding walker by failure to set locking mechanism, tripping on obstacles or stair due to improper use, etc.



Importance of notifying the representative in the event of malfunction or faulty parts on unit.



Patient and caregivers have information necessary to contact the representative if needed.



Precautions in case of an emergency.

## **Notice of Privacy Practices**

## Notice of Privacy Practices Page 1 of 4

## THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

New Way Medical Supply, LLC uses health information about you for treatment, to obtain payment for treatment, to evaluate the quality of care you receive, and for other administrative and operational purposes. Your health information is contained in medical record that is the physical property of New Way Medical Supply, LLC.

#### **Uses or Disclosures of Your Health Information**

**Treatment.** We may use and disclose health information about you to provide you with respiratory care products and services, enteral nutrition products and services, infusion therapy products and services, home medical equipment, or related medical treatment or services. To this end, we may communicate with other health care providers regarding your treatment and coordinate and manage your health care with others. For example, information related to your treatment may be shared with a health care provider, such as your physician, a pharmacist, nurse, respiratory therapist, or other person providing health services to you. This information is necessary for health care providers to determine what treatment you should receive. Health care providers also may record actions taken by them in the course of your treatment and note how you responded to the actions.

**Payment.** We may use and disclose health information about you to others for purposes of receiving payment for treatment and services that you receive. For example, a bill may be sent to you or a third-party payer, such as Medicare, an insurance company, or a health plan. The information on the bill may include information that identifies you, your diagnosis, and treatment or supplies used in the course of your treatment. In some instances, we may disclose health information about you to an insurance plan before you receive certain health care products or services, to determine whether the insurance plan will pay for the particular product or service. If other treatment providers need medical information about your treatment in order to bill for their services, we may provide it to them.

**Health Care Operations.** We may use and disclose health information about you for administrative and operational purposes. Risk management or quality improvement personnel may use health information about you to assess the care and outcomes in your case and others like it. The results will be used internally to continually improve the quality of care for all patients. For example, we may combine medical information about many patients to evaluate the need for new products, services, or treatments. We may disclose information to health care professional, students, and other personnel for review and training purposes. We also may combine health information we have with other sources to see where we can make improvements. We may remove information that identifies you from this set of health information to protect your privacy and to allow others to use the information to study health care without learning the identity of specific patients.

#### We may also use and disclose medical information to:

- evaluate the performance of our staff and your satisfaction with our services;
- learn how to improve our facilities and services;
- determine how to continually improve the quality and effectiveness of the health care we provide; and
- conduct training programs or review competence of health care professionals.

Individuals Involved in Your Care or Payment for Your Care. We may release health information about you to a family member or friend who is involved in your medical care. We also may give information about you to someone who helps pay for your care. In addition, we may disclose health information about you to an entity assisting in a disaster relief effort (such as the Red Cross) so that your family can be notified about your condition, status, and location. We may also disclose medical information about you to local authorities or utility companies if your home care is considered "life-supporting" and you require immediate attention in the event of an emergency or power outage.

## Notice of Privacy Practices Page 2 of 4

**Business Associates.** We provide some services through contracts with business associates, including companies that receive phone calls from patients when our offices are closed, companies that store patient files for us, and companies that collect payments for us. In addition, we also contract with accountants, consultants, and attorneys to provide us with services. When such services are contracted, we may disclose health information about you to our business associates so that they can perform the tasks that we have assigned to them. To protect your health information, we require the business associate to appropriately safeguard health information about you.

**Reminders.** We may use health information about you to provide you with reminders about appointments or the need to refill supplies.

**Alternative Treatments.** We may use health information about you to provide you with information about alternative treatments or other health-related benefits and services that may be of interest to you.

**Future Communications.** We may communicate with you via newsletters, mailings, or other means regarding treatment options, health-related information, disease management programs, wellness programs, or other community-based initiatives or activities in which we are participating.

**Required by Law.** We may use and disclose health information about you as required by federal, state, or local law. For example, we may disclose health information for the following purposes:

- for judicial administrative proceedings pursuant to legal authority;
- to report information related to victims of abuse, neglect, or domestic violence; and
- to assist law enforcement officials in their law enforcement duties.

**Public Health.** We may use or disclose health information about you for public health activities such as assisting public health authorities or other legal authorities to prevent or control disease, injury, or disability, or for other health oversight activities.

**Food and Drug Administration (FDA).** We may use or disclose health information about you for purposes of notifying the FDA of adverse events with respect to medication and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacements.

**Health and Safety.** We may use or disclose health information about you to avert a serious threat to the health or safety of you or any other person pursuant to applicable law.

**Government Functions.** We may use or disclose health information about you for specialized government functions, such as protection of public officials, national security and intelligence activities, or reporting to various branches of the armed services.

**Medical Examiners and Others.** We may use or disclose health information about you to medical examiners, coroners, or funeral directors to allow them to perform their lawful duties. If you are an organ or tissue donor, we may use or disclose health information about you to organizations that help with organ, eye, and tissue donation and transplantation.

**Workers Compensation.** We may use or disclose health information about you to comply with laws and regulations related to workers compensation.

**Research.** We may use or disclose health information about you for research purposes under certain circumstances. For example, we may disclose health information about you to a research organization if an institutional review board or privacy board has reviewed and approved the research proposal, after establishing protocols to ensure the privacy of your health information.

**Information Not Personally Identifiable.** We may use or disclose health information about you in ways that do not personally identify you or reveal who you are.

## Notice of Privacy Practices Page 3 of 4

**Correctional Institutions.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may use or disclose health information about you. Such information will be disclosed to the correctional institution or law enforcement official when necessary for the institution to provide you with health care and to protect the health and safety of others.

#### **Your Health Information Rights**

You have the following rights with respect to health information about you. To exercise any of your rights, please obtain the required forms from New Way Medical Supply, LLC and submit your request in writing to the manager or to the HIPAA Compliance Officer at the address at the end of this notice.

**Right to Inspect and Copy.** You have the right to inspect and/or obtain a copy of the health information about you that we maintain in certain groups of records that are used to make decisions about your care. Your request must be in writing. If you request a copy of your health information, we may charge you a fee to cover the costs of copying and mailing the information.

In certain very limited circumstances, we may deny your request to inspect and copy your health information. If you are denied access to your health information, we will explain our reasons in writing. You have the right to request that the decision be reviewed by another person. We will comply with the outcome of the review.

**Right to Amend.** If you feel that health information about you that we maintain in certain groups of records is inaccurate or incomplete, you have the right to request that we amend the information. You have the right to request an amendment as long as we maintain the information. Your request must be in writing and include a reason supporting the request. In certain circumstances, we may deny your request to amend your health information. If your request for an amendment is denied, we will explain our reasons in writing. You have the right to submit a statement explaining why you disagree with our decision to deny your amendment request. We will share your statement when we disclose health information about you that we maintain in certain groups of records.

**Right to an Accounting of Disclosures.** You have the right to request an accounting or detailed listing of certain disclosures of your health information. The time period covered by an accounting is limited. Your request must be in writing. If you request an accounting more often than once every twelve (12) months, we may charge you a fee to cover the costs of preparing the accounting.

**Right to Request Restrictions.** You have the right to request a restriction or limitation on the health information about you that we use or disclose. Your request must be in writing. Please be aware that we are not required to agree to your request for restrictions. If we agree to your request for restriction, we will comply with it unless the information is needed for emergency treatment.

**Right to Request Alternative Communications.** You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. We will agree to the request to the extent that it is reasonable for us to do so. For example, you may request that we use an alternative address for billing purposes.

**Right to Revoke Authorization.** There are occasions when you may give us written authorization to use or disclose your health information. You have the right to revoke your authorization to use or disclose health information, except to the extent that action has been taken in reliance upon your authorization.

**Right to Copy of Notice of Privacy Practices.** You have the right to a paper copy of our Notice of Privacy Practices at any time. To obtain a copy of our current Notice of Privacy Practices, please contact us at the address or phone number listed on the next page.

## Notice of Privacy Practices Page 4 of 4

#### **New Way Medical Supply's Obligations**

New Way Medical Supply is required to:

- maintain the privacy of protected health information;
- provide you with this Notice of our legal duties and privacy practices with respect to your health information;
- abides by the terms of the Notice of Privacy Practices currently in effect;
- notify you if we are unable to agree to a requested restriction on how your health information is used or disclosed
- accommodate reasonable requests you may make to communicate health information by alternative means or at alternative locations
- · obtain your written authorization to use or disclose your health information for reasons other than those
- identified in this Notice and permitted by law; and
- comply with your state's laws if they provide you with greater rights over your health information or
- provide for more restrictions on the use or disclosure of your health information.

New Way Medical Supply reserves the right to change the terms of this Notice, our privacy practices, and to make the new provisions effective for all protected health information we maintain. You may contact us at the address or phone number listed below to obtain a revised Notice of Privacy Practices.

#### **Contact Information**

For questions or grievances please contact New Way Medical Supply at (210) 612-4343 Monday-Friday between the hours of 9:00 AM and 5:00 PM CST.



(210) 612-4343

newwaymedicalsupply.com



## How did we do?

Please let us know about your experience with our delivery. Scan the QR code to take a quick survey.

Open your phone's camera app, point it at the QR code and hold steady for a few seconds. Tap the notification or pop-up that appears and you will be taken directly to the survey. Or, take the survey online:

newwaymedicalsupply.com/survey

