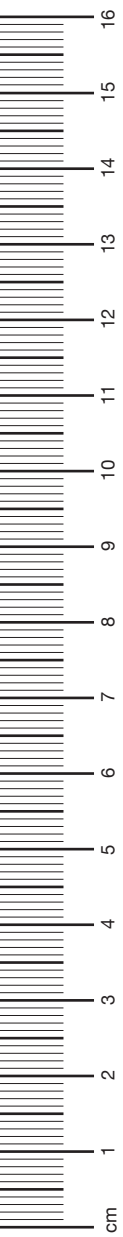
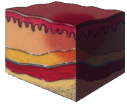


Pressure Injuries

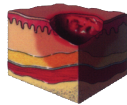


Stage 1



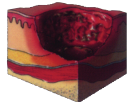
Pressure Injury: Non-blanchable erythema of intact skin with a localized area of non-blanchable erythema, which may appear differently in dark pigmented skin. Presence of blanchable erythema or changes in sensation, temperature or firmness may precede visual changes. Color changes do not include purple or maroon discoloration; these may indicate deep tissue pressure injury.

Stage 2



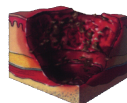
Pressure Injury: Partial-thickness skin loss with exposed dermis
The wound bed is viable, pink or red, moist, and may also present as an intact or ruptured serum-filled blister. Adipose (fat) is not visible. These injuries commonly result from adverse microclimate and shear in the skin over the pelvis and shear in the heel. This stage should not be used to describe moisture-associated skin damage (MASD), including incontinence-associated dermatitis (IAD), intertriginous dermatitis (ITD), medical adhesive-related skin injury (MARS) or traumatic wounds (skin tears, burns, abrasions).

Stage 3



Pressure Injury: Full-thickness skin loss
Full-thickness loss of skin in which adipose (fat) is visible in the ulcer and granulation tissue and epibole (rolled wound edges) are often present. Slough and/or eschar may be visible. The depth of tissue damage varies by anatomical location; areas of significant adiposity can develop in deep wounds. Undermining and tunneling may occur. Fascia, muscle, tendon, ligament, cartilage and/or bone are not exposed. If slough or eschar obscures the extent of tissue loss, this is an Unstageable Pressure Injury.

Stage 4



Pressure Injury: Full-thickness skin and tissue loss
Full-thickness skin and tissue loss with exposed or directly palpable fascia, muscle, tendon, ligament, cartilage or bone in the ulcer. Slough and/or eschar may be visible. Epibole (rolled edges), undermining and/or tunneling often occur. Depth varies by anatomical location. If slough or eschar obscures the extent of tissue loss, this is an Unstageable Pressure Injury.

www.npiap.org/resources/educational-and-clinical-resources/pressure-injury-staging-illustrations

Medicare's Support Surface Model



 **Ethos™** Therapy Solutions
OutcomesMatter™

Office: 888.861.8612 • Fax: 844.533.0601

Medicare's Support Surface Requirements

Group 1 - Prevention

(limited availability w/ Ethos)

Classification

- Pressure Reduction
- Purchased equipment

Qualifications

- Complete/limited mobility and one of the following
 - High Risk Factors
 - Stage 1 wound
 - Stage 2 wound



Dry Pressure Mattress
E0184



Gel Overlay
E0185



Alternating Pressure Pad
E0180

Group 2 - Therapy

Classification

- Pressure Redistribution
- Rental equipment

Qualifications

- Multiple Stage 2 wounds - Following a 30 day "conservative" treatment plan
- Single Stage 3 or 4 on trunk
- Status Post Myocutaneous Flap Surgery



Non Powered
Overlay
E0371



Non Powered
E0373



Powered
Overlay
E0372



Powered
Mattress
E0277

Group 3 - Therapy

Classification

- Pressure Redistribution
- Rental equipment

Qualifications

- Stage 3 (full thickness tissue loss) or Stage 4 (deep tissue destruction) pressure injury
- Severe immobility (chairbound or bedridden)
- A trained adult caregiver available to assist patient with ADL
- Group 2 products tried without success (documented)
- Physician order and monthly recertification
- Institutionalization required w/o AFT therapy (documented)



E0194 - Air Fluidized Therapy Bed