

Hill-Rom® Bariatric Solutions

Transforming bariatric care.



Enhancing outcomes for patients and their caregivers:

Hill-Rom

Transforming Bariatric Care

Our nation's growing obesity problem is creating a new reality for healthcare. As obesity rates rise, risk of obesity-related health problems increases exponentially.¹ Yet many healthcare facilities are challenged to deliver safe, dignified and cost-effective bariatric care.

Hill-Rom responds with a comprehensive solution:

- Industry-leading product portfolio
- Clinical expertise and evidence-based programs
- Flexible service support, room design and financial options

With solutions designed to help raise the standard of care for you and your patients, Hill-Rom is transforming bariatric care.





The challenges associated with the management of the bariatric patient population impact staff across U.S. hospitals.²

Increased lengths of stay, injuries related to mobility issues, such as falls and pressure ulcers, and higher 30-day readmission rates can be costly.³

Bariatric Product Portfolio

Hill-Rom's industry-leading bariatric portfolio helps support the full spectrum of clinical needs—including lifting, transferring, addressing immobility and pressure ulcer prevention—providing real-time visibility to patients and delivering dignified care.

Bariatric Beds and Surfaces



Sentinel II Bariatric Low Bed

- Supports fall prevention protocols
- 850 lb weight capacity with 38"–48" width expansion
- Low bed height of 10.88"
- Bed exit alarm
- Connection to nurse call



Tri-Flex™ II Bariatric Bed

- Low acuity bed
- 1,000 lb weight capacity with 37"–48" width expansion
- Impulse drive system
- Synergy® Air Elite surface



Excel Care® ES Bariatric Bed

- Upper mid-range acuity bed
- 1,000 lb weight capacity with 40"–50" width expansion
- Low air loss surface with CLRT



TotalCare® Bariatric Plus Bed

- High acuity bed
- 500 lb weight capacity with 40" width
- IntelliDrive® powered transport
- Integrated low air loss surface with CLRT and/or P&V
- Advanced clinical workflow integration
- Supports early mobility protocols



Compella™ Bariatric Bed

- High acuity bed
- 1,000 lb weight capacity with 40"–50" exclusive powered width expansion
- IntelliDrive® XL powered transport
- 3-mode bed exit alarm with silence feature
- Semi-integrated low air loss surface with CLRT
- Advanced clinical workflow integration

Facility capabilities and equipment inventory should be conducted to identify the specialty equipment, furniture and supplies needed to provide appropriate bariatric care.^{4,5}

Bariatric Product Portfolio

Hill-Rom® solutions work together to help safely streamline routine tasks while providing a comfortable experience for both patients and caregivers.



Lift Systems

- Comprehensive safe patient handling solutions to help achieve patient mobilization goals
- Provide lift capacities of 660 to 1,100 lbs
- Viking® Lift, LikoGuard™ XL Overhead Lift and UltraTwin™ and FreeSpan™ UltraTwin Lift Systems

Transfer Equipment

- Solutions to streamline bariatric patient transfers and transports
- Barton® Transfer Chair, AIRPAL® Lateral Transfer System and Procedural Stretcher with IntelliDrive® Powered Transport

Most healthcare facilities lack equipment and protocols for lifting and moving bariatric patients.⁶



Furniture and Accessories

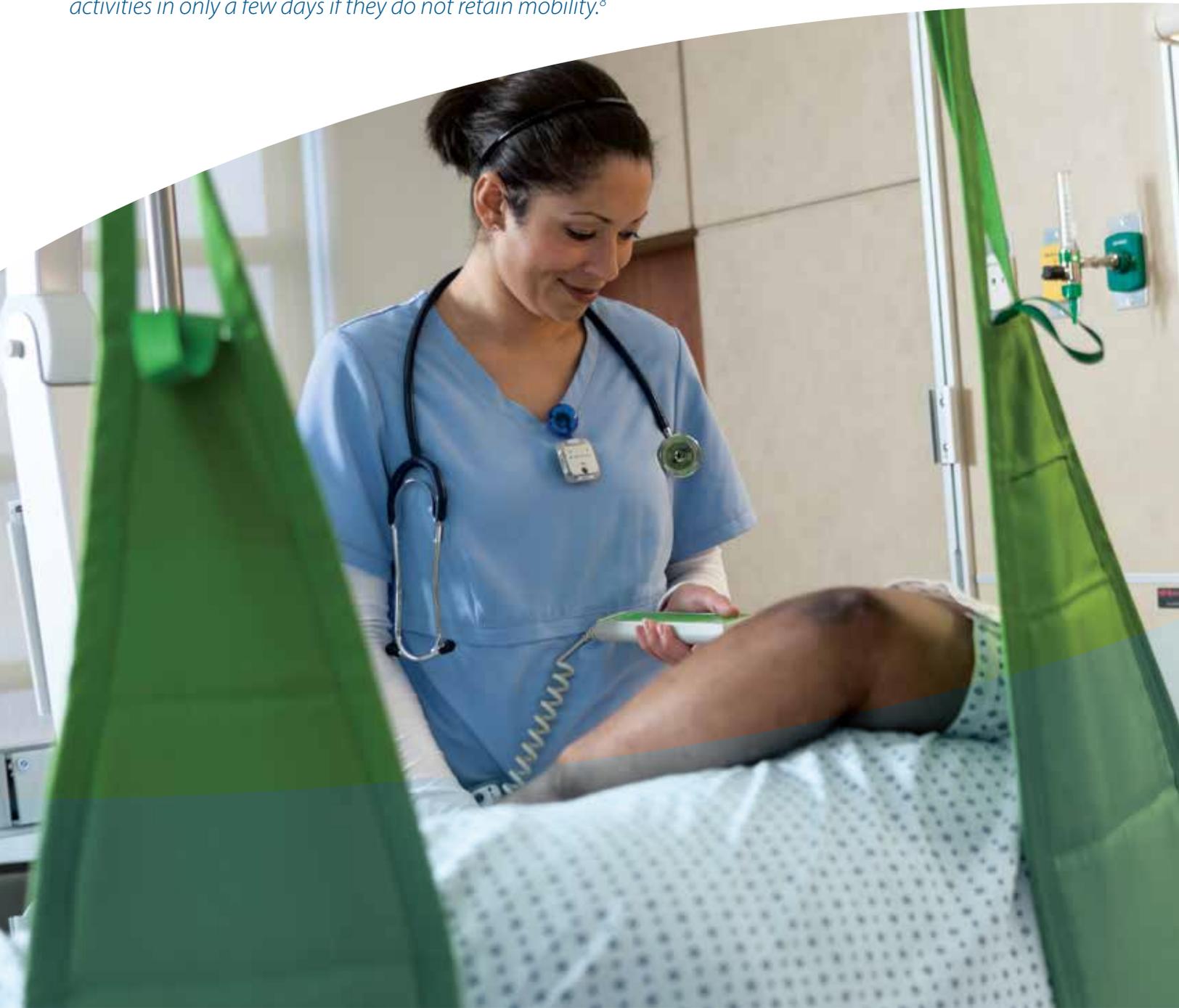
- Solutions delivering enhanced comfort, functionality and style for bariatric patients and families
- Bariatric recliner, large capacity waiting room furniture, large-size bariatric wheelchairs, walkers and commodes

To help minimize the risks associated with manual handling of obese individuals, staff must be properly trained and aware of what equipment is available, how to access it quickly and how to use it with bariatric patients.⁷

Clinical Programs

Clinical expertise and evidence-based programs help respond to the challenges of bariatric care by addressing critical safety issues and patient outcomes.

Bariatric patients can lose ability to mobilize or perform self-care activities in only a few days if they do not retain mobility.⁸



Progressive Mobility® Program offers practical tools for progressing patients safely from lying in bed, to sitting up, to standing.



Safe Transfers and Movement™ Program

supports safe patient handling practices that help protect caregiver safety.

Up to 30% of caregiver injuries are associated with patient handling for bariatric patients.²



Fall Prevention Program follows established guidelines and best practices for preventing hospital falls and fall-related injuries.

Up to 30% of falls occur among obese patients.^{10,11}



Safe Skin® Program provides tools and training designed to reduce the risk of pressure ulcers and promote wound healing.

Obese patients are at a higher risk for developing pressure ulcers.¹²⁻¹⁴



Impact Tracker™ Quality Improvement Program

enables facilities to establish baselines, evaluate progress and identify opportunities for improvement.

RoomBuilder® Design Services

Flexible support helps adapt and respond to the urgent and evolving needs of bariatric patients.



Accommodating bariatric equipment often creates obstacles which could compromise caregiver safety, workflow and patient care.

- Hill-Rom's RoomBuilder® Design Services offers a proven approach for optimizing the bariatric patient environment

Accommodations should be made for bariatric patients when designing new facilities and renovating existing facilities.⁵



Flexible Financial Options

With the rise in bariatric patient admissions, many hospitals are looking for ways to balance cost and clinical outcomes. Hill-Rom can help with:

- Robust data analytics and business reviews
- Flexible rentals models to meet clinical and financial needs
- Identify optimal mix of owned and rented equipment



Service Support Programs

Access to bariatric equipment is vital for the management of bariatric patients. Hill-Rom provides industry-leading service and support through:

- Extensive service network
- Customized delivery options to fit your rental needs
- Robust service programs with reliable and dependable on-site maintenance and repair of your owned capital equipment

Assistive equipment for bariatric patient handling tasks should be carefully selected, readily available, easily accessible, and properly coded and maintained.^{7,8,15}

Hill-Rom is a leading global medical technology company with more than 10,000 employees worldwide. We partner with health care providers in more than 100 countries by focusing on patient care solutions that improve clinical and economic outcomes in five core areas: **Advancing Mobility, Wound Care and Prevention, Clinical Workflow, Surgical Safety and Efficiency, and Respiratory Health.** Around the world, Hill-Rom's people, products, and programs work towards one mission: **Every day, around the world, we enhance outcomes for patients and their caregivers.**

Please refer to the individual product sheets for more information on standard and optional features.

¹ Trust for America's Health and Robert Wood Johnson Foundation. *F as in Fat: How Obesity Threatens America's Future.* Washington, D.C.: Trust for America's Health, 2012.

² Randall SB, Pories WJ, Pearson A, Drake DJ. Expanded Occupational Safety and Health Administration 300 log as metric for bariatric patient-handling staff injuries. *Surg Obes Relat Dis.* 2009 Jul-Aug;5(4):463-8.

³ Rice S. Retrofitting hospitals for obese patients. *Modern Healthcare.* 2014 Feb. modernhealthcare.com/article/20140208/MAGAZINE/302089980.

⁴ Gallagher_Back Injury Prevention in Healthcare. *Handbook of Modern Hospital Safety.* 3-44 - 3-78. 2010

⁵ ECRI. *Equipping Facilities for Bariatric Patients.* PSO Navigator. November, 2011. Volume 3, Number 4.

⁶ Gallinsky, T. Addressing the Need for Research on Bariatric Patient Handling. *Rehabilitation Nursing* • Vol. 35, No. 6 • November/December

⁷ McGinley, L. Best Practices for Safe Handling of the Morbidly Obese Patient. *Bariatric Nursing and Surgical Patient Care.* Volume 3, Number 4, 2008

⁸ Hahler, *Safe Patient Handling and Movement, A Guide for Nurses and Other Health care Providers.* 2005. pg 14.

⁹ Weiss AJ, Elixhauser A. Obesity-related hospitalizations, 2004 versus 2009. HCUP Statistical Brief #137. <http://www.hcup-us.ahrq.gov/reports/statbriefs/sb137.jsp>.

¹⁰ Hitcho, Eileen B. et al. Characteristics and Circumstances of Falls in a Hospital Setting. 2004 *Journal of Internal Medicine.* 2004; 19:732-739.

¹¹ Krauss, MJ. et al. A Case-control Study of Patient, Medication, and Care-related Risk Factors for Inpatient Falls. 2005 *Journal of Internal Medicine.* 2005; 20:116-112.

¹² Pokorny. The Relationship Between Pressure Ulcer Prevalence, Body Mass Index, and Braden Scales and Subscales: A Further Analysis. *Advances in Skin and Wound Care.* Vol 27 NO. 1 January 2014; pp 3-4

¹³ Pemberton, V. The Effect of Using a Low-Air-Loss Surface on the Skin Integrity of Obese Patients: Results of a Pilot Study. *Ostomy Wound Management* 2009;55(2):44-48

¹⁴ Gardner, L. Skin Integrity, Immobility, and Pressure Ulcers in Class III Obese Patients. *Pennsylvania Patient Safety Advisory.* Vol. 10, No. 2—June 2013

¹⁵ Veterans Affairs Safe Bariatric Patient Handling Toolkit. *Bariatric Toolkit | Rev. 8-8-07.*

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