This algorithm is meant as a guide, not a substitute for clinical judgment. It should be used only as an adjunct to a full patient assessment, and should not preclude use of any product positioned higher on the algorithm.

**Support Surface ALGORITHM**

1. **Does the patient have a stabilized (4-6 weeks post-op) flap or graft?**
   - **YES**
     - PressureGuard: Custom Care Convertible LAL (with control unit)
   - **NO**

2. **Does the patient require microclimate management for one or more of the following?**
   - 1-2 on Braden Moisture Subscale,
   - 1 on the Braden Activity Subscale,
   - 1 on the Braden Mobility Subscale
   - **YES**
     - PressureGuard: Protocol
   - **NO**

3. **2-3 on the Braden Moisture Subscale,**
   - 2 on the Braden Activity Subscale,
   - 2 on the Braden Mobility Subscale
   - **YES**
     - PressureGuard: APM/APM2/Safety Supreme
   - **NO**

4. **Does the patient have multiple stage 3/4/UNS pressure injuries (other than on the heels)?**
   - **YES**
     - PressureGuard: Custom Care Convertible (mattress only)
   - **NO**

5. **Does the patient have multiple Stage 2 or single Stage 3/4/UNS* pressure injuries (other than on the heels)?**
   - **YES**
     - PressureGuard: Custom Care Convertible LAL (mattress only)
   - **NO**

   **Geo-Mattress:**
   - HC/Max/Plus/Pro/350
   - GM with Wings
   - UltraMax
   - Atlas (>500 lbs.)
   - PressureGuard
   - Custom Care

6. **Is the pressure injury complex (heavy exudate infection, poor nutrition, etc.)?**
   - **YES**
     - PressureGuard: Custom Care Convertible LAL (mattress only)
   - **NO**

**The Topper Microenvironment Manager™ (MEM) can be added to these products when patient conditions require management of excess heat and moisture.**

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**Notes/Clinical References:**

1. If patient has a flap or graft that is less than 4 weeks post-op, total off-loading (proning) or air fluidized therapy is required. Avoid sliding patient on surface during repositioning, ADLs & transfers. Only float or alternating pressure modes (not lateral rotation) should be used when the patient is placed directly on the flap or graft. *Source: Wound Care Practice. Sheffield. P. 1st edition, 2004, Chapter 17, P. 345. Other Span surfaces may be appropriate if used according to the guidelines.*

2. Patients with excessive moisture due to sweating, decreased mobility, lack the ability to reposition, be repositioned, refuses to be or stay repositioned. Patients with macerated skin due to any of the previous. Patients with increased skin or body temperature due to infection, sepsis or other conditions.

3. Patients with multiple, complex (heavy exudate, infection, poor nutrition, etc.) pressure injuries may be placed on the Easy Air, Easy Air LR, Custom Care Convertible LAL (with control unit).

4. Heel injuries are difficult to heal and should be elevated off of the bed. Consider using Heel Manager™ or other Span positioners.

5. UltraMax may also be appropriate for multiple Stage 2 or single Stage 3 pressure injuries, and Max, Plus, Pro, Wings. Atlas or 350 may be appropriate for single Stage 2 pressure injuries, based on full assessment of skin status and repositioning required, according to best clinical practice and judgment.

6. As bariatric products, the Easy Air XL and APM Bariatric are not designed to ensure sufficient pressure redistribution and comfort for users less than 500 lbs. For these users, non-bariatric PressureGuard models in standard (33.5”W) or extra-wide widths should be selected.

*UNS— Unstageable Pressure Injury: observed full-thickness skin and tissue loss—NPUAP, 2018