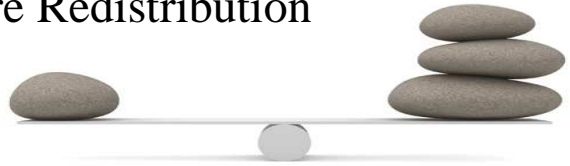




The Rest-Q GS™

Broad Spectrum Pressure Redistribution



Healthcare providers are caring for rising acuity levels and also an increasingly heavier patient population. In response to this increase in heavier patients, many facilities often request that new mattresses have a weight capacity of 500 lbs. Some manufacturers list a 500 lb capacity, but will the design in fact safely and comfortably support heavier patients?

If a design is supportive enough for those in the upper weight ranges, will it feel too firm or leave lighter patients at risk of an increase in pressure related problems?

Questions

- * Can a sleep surface provide clinically effective pressure redistribution for patients across a broad spectrum of body shapes and weights?
- * Can a mattress engineered to provide comfortable support for a heavier patient, also meet the comfort and therapeutic needs of the very light and very frail?
- * Can a non-mechanical sleep surface, capable of comfortably supporting bodyweights at each end of the spectrum, provide the therapeutic environment that complements care and supports wound healing?

Genesis of the GS (Gentle Strength)

The Comfortex Rest-Q® mattress (with a 350 lb recommended weight limit) has been used by Hospitals & Nursing Homes for more than a decade. Clinicians within a Wisconsin based health system were considering a conversion to the Rest-Q®, but given their patient population, they wanted a mattress with an effective 500 lb capacity.

In an effort to serve this system, Comfortex modified its Rest-Q® in numerous ways until arriving on what has become the Rest-Q GS™. The GS incorporates additional layers of soft and firm HR (high resiliency) foams. At the foot-end of the bed, the Rest-Q's heel suspension system was modified with an open diamond – dual density system. The goal was to ensure the pressure redistribution and comfortable feel would be there for each body type, large and small.

In-house testing showed great potential, regardless of body mass or bed position. Samples were then presented to the health system for clinical review and comparisons. After the product comparisons and evaluations, the Rest-Q GS™ was selected.

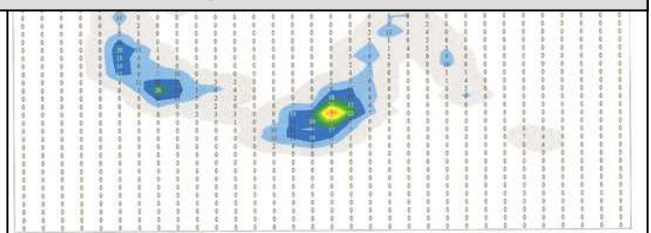
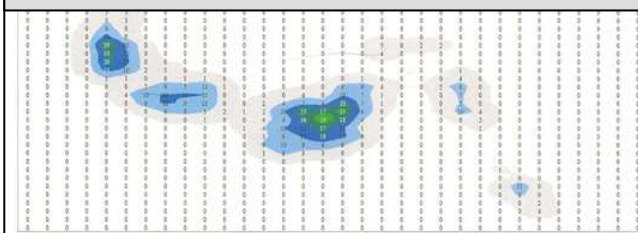
Interface Pressure Testing compares the Rest-Q GS™ to a \$2700 Foam-Gel mattress, which the manufacturer has rated as having a 500 lb. capacity.

** Interface pressure images help illustrate a surfaces potential performance. Clinical use is required to demonstrate actual performance.*

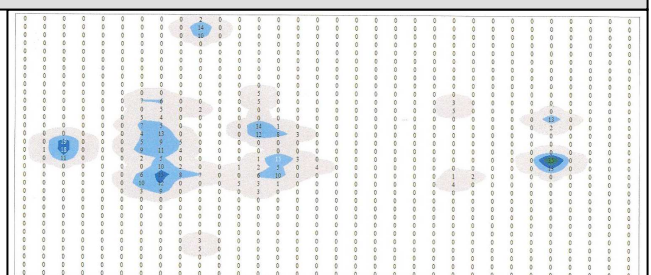
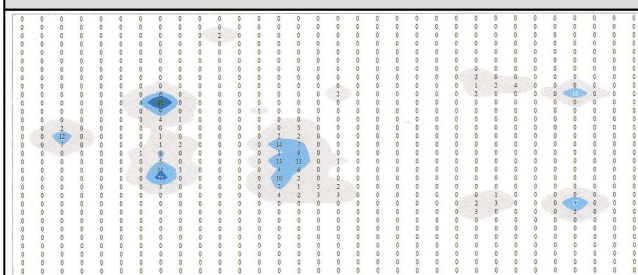
Rest-Q GS™ (\$700 or less)

Foam Gel (\$2700)

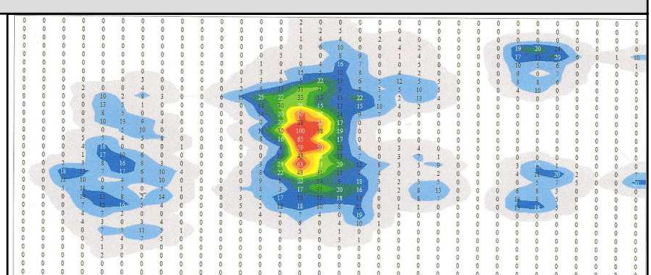
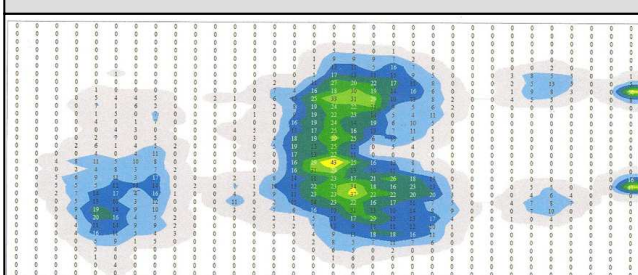
145 lb. female side laying



115 lb. female supine



390 lb. female H.O.B. elevated to 45°



Interface Pressure Imaging was conducted at a major health system in Wisconsin.

Testing Therapeutic Capabilities (Evidenced Based)

Clinicians caring for patients with pressure wounds and other health issues were provided with a Rest-Q GS™ to replace the current surface. This data reflects the outcomes and experiences reported by the patients and their caregivers.

Patient # 1 is female, age 87 years with a body weight of 84 lbs.

Patient # 2 is male, age 51 years with a body weight of 678 lbs.

Results

Patient # 1: Female, age 87, **weight 84 lbs.** , Braden Score 19, moved to the Rest-Q GS from a foam, pressure redistribution mattress.

As of Start Date : Excoriated sacral wound has progressed to a denuded type wound. Wound bed is pale pink, granulated and bleeds easily. **4 cm x 4 cm x 3 mm** depth. Patient rests upon the wound constantly.

After 6 weeks: Wound is epithelializing. Depth has reduced to 1mm. Wound area has reduced to **1.5 cm x 1.5 cm**.

Nursing comments: Patient spends nearly 22 hours a day in bed and she said , “I’ll fight anyone who tries to take this away.” Her comfort and her wound both improved significantly.

Patient # 2: Male, age 51 **weight 678 lbs.** , Braden Score 15, Diabetes, Congestive Heart Failure.

As of Start Date: Stage 2 wound on his right heel, pooled blood beneath wound surface, edges have white peeling tissue. **7 cm x 8 cm x .2 cm** depth with moderate exudates, primarily sanguinous, yellow. Patient is difficult to turn or reposition.

After 6 weeks: Patient’s weight has increased from 678 lbs to 706 lbs., Braden Score 12, patient is no longer verbal. Wound base is beefy red, sanguinous yellow drainage. Wound has decreased in size to **3.3 cm x 5.5 cm** (patient expired shortly after this report).

Nursing Comments: We were glad to see the surface enhanced his comfort level. Throughout the time on the Rest-Q GS mattress, (24/7), the patient repeatedly commented on his improved comfort. Given the significant challenges, we were very pleased to see the wound healing that we did.

Manufacturers note : Comfortex's goal with the development of the Rest-Q GS was to enhance the support factors of the Rest-Q mattress design, to ensure comfort and therapeutic capabilities would be realized for a broader spectrum of patients and better serve the healthcare providers.

While a manufacturer can work to innovate and engineer, it's the clinicians and patients who volunteer to do such research that elevate healthcare capabilities.

Our thanks to all.

SUBJECT: REST-Q GS

Kathy,

Per your request, I am submitting a narrative of our experience, both resident and myself as wound nurse.

Resident:

Resident initially was agreeable to do trial. At that point, her wound was a denuded wound that virtually was her entire left buttock cheek and Coccyx region. Resident immediately commented on how comfortable mattress was and also stated she was sleeping and resting much better than before. Resident at one time stated that she would "fight anyone who would try to take it away." Resident did experience a decline during the trial for problem unrelated to wound or wound therapy. But rebounded and is doing great.

Sum it up: Extremely comfortable

Wound Nurse:

Resident had a waxing and waning wound that as soon as it appeared to be healing wound re-open and become bad again despite treatment attempted. Started Rest-Q GS in early September. Wound initially became worse again which was part of her normal pattern. Resident then developed a UTI and nutrition declined significantly. Resident's weight went down as well. Point to note, resident is respiratory compromised and sleeps in an orthopneic position when ever in bed. This places resident's weight directly on wound site, which was deterring healing. During trial and decline, resident became, for lack of better terms, bed ridden. So for most of the healing process, resident was in the bed, or Rest-Q GS, in an orthopneic, or sitting position. Also a CWOCN was consulted and determined that there may be a bio-burden that was causing healing delay. From about one week until now, the healing processes is amazing. The wound went from one large 4cm diameter wound to 3 tiny superficial wounds, one of which I just today, considered healed. This resident spends approximately 22 hours per day, sitting in the bed, in orthopneic position, and yet it is healing better than it has, and looks the best it has ever had.

Sum it up: Extremely impressed!

If you have any further questions, please call me.

Respectfully Submitted,

George D. Tonkin, RN

George D. Tonkin, RN
Wound Nurse

For additional product information
and clinical reports, please call
Comfortex at 1-800-445-4007.