

# 2021 DME Product Guide



K2ISNP APP



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P: 800-313-6468 • F: 866-637-6864 • [ORDERS@KUSTOMKINETICS.COM](mailto:ORDERS@KUSTOMKINETICS.COM) • [KUSTOMKINETICS.COM](http://KUSTOMKINETICS.COM)



## ABOUT KUSTOM KINETICS

Kustom Kinetics (Mid-south Medical Equipment, Inc.) provides Medicare-approved pressure relief surfaces, negative pressure wound therapy, surgical dressing, and prefabricated orthotics to patients in post-acute care facilities. Working with nurse practitioners, therapists, and nursing home staff, we provide the highest quality products from the finest manufacturers and meet the needs of thousands of patients annually.

Throughout the country, our Population Health Managers use on-site visits, as well as video conferencing, to provide assessments, training, and ongoing support to ensure proper product use and maximize patient benefit. They work with Nursing and Therapy departments to ensure that all products ordered meet the criteria for medical necessity. Our Population Health Managers work with facility administrators to identify cost savings, increase profitability, and reduce hospital re-admissions. They are knowledgeable on the requirements of all major insurance plans.

For 25 years, Kustom Kinetics has been a patient-centered company aiming to provide exceptional care, service, and products to our customers. Let us partner with you to heal your patients.

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## ABOUT OUR FOUNDER - ROLAND SHAPLEY

Roland Shapley has been President and CEO of Kustom Kinetics since 2004. During that time, he has transformed the company from a small regional provider of custom wheelchairs into a national DME organization offering a broad range of products and education to skilled nursing facilities, nursing homes and home health.

Roland is innovative and creative, promoting technology in an industry slow to move from paper to electronic-based communications. Most recently, he led Kustom Kinetics to introduce a mobile app, K2ISNP. The app is a convenient product decision tree for use by healthcare professionals in post-acute care facilities. Roland also encouraged the use of technology through video conferencing to educate and advise healthcare professionals well before the pandemic crisis hit our country.



Roland began his career in the nineties at MedAssist-OP Inc. He went on to co-found Mid-South Assistive Technology in the early 2000's before his current position at Kustom Kinetics.

Roland can be reached directly at [roland@kustomkinetics.com](mailto:roland@kustomkinetics.com) or (901) 619-8897. He will direct you to the Kustom Kinetics Population Health Manager for your area of the country.

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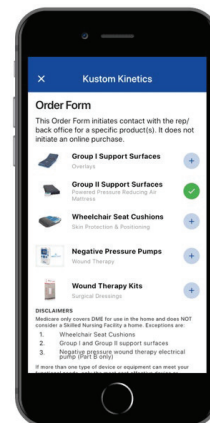
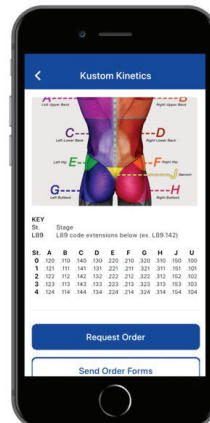
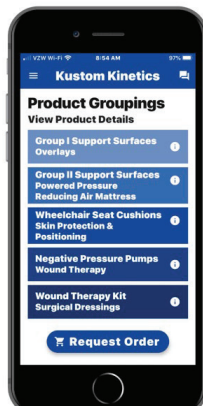
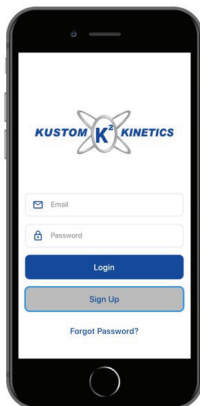
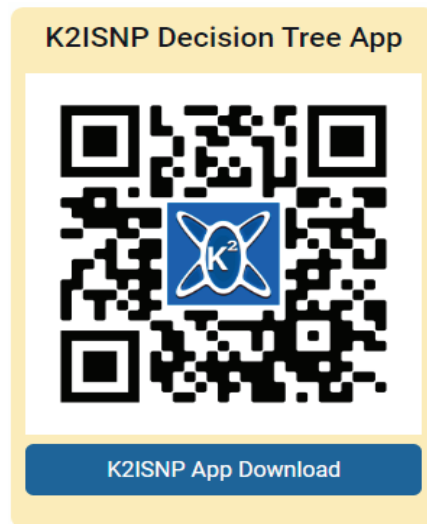


# K2ISNP DECISION TREE APP

At Kustom Kinetics, we work with insurance companies, long term care facilities, hospitals, and other medical providers to equip nurse practitioners, therapists, and other nursing home staff with top of the line products and continuing education resources.

The K2ISNP Decision Tree App helps you quickly find the medical products you need to improve the quality of life of your patients. The app is also an excellent way to contact your Kustom Kinetics Population Health Manager and research items you need on the go.

Download it now from the Apple App Store or Google Play



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# SUPPORT SURFACE (MATTRESS) – GROUP II

Kustom Kinetics reserves the right to substitute products that are the same or similar in nature.



## MATTRESS REPLACEMENT SYSTEM: 3000 - low Air Loss/Alternating Pressure Powered

### FEATURES AND BENEFITS

- Suitable for any home care wound treatment protocol.
- User-friendly weight dials for customized therapy.
- High-quality functions include: alternating pressure, low air loss, static float, and low-pressure alarm with audio and visual indicators.

### MATTRESS & COVER

- 18 laser holes keep the patient cool and dry.
- Removable, water resistant, non-shear, antimicrobial nylon cover.
- Pillow top feature prevents head and neck from unnecessary movement during alternating mode.
- Optional raised side rails.
- Warranty: 18 Month Non-Prorated.

### PROTEKT™ AIRE 3000 PUMP

- Low air loss and alternating pressure therapies in one system.
- Air flow dial offers custom patient comfort and pressure levels. Static function for safe and easy patient transfer. Preset 10-minute alternating cycle. Low pressure alarm indicates air flow may be compromised.
- **Weight Capacity: 350 lbs.**



## MATTRESS REPLACEMENT SYSTEM: 3000 with Bolsters - Low Air Loss/Alternating Pressure Powered

### FEATURES AND BENEFITS

- Suitable for any home care wound treatment protocol.
- User-friendly weight dials for customized therapy.
- High-quality functions include: alternating pressure, low air loss, static float, and low-pressure alarm with audio and visual indicators.

### MATTRESS & COVER (available in 84 length)

- Raised side perimeter air bolsters mitigates accidental patient roll-outs and reduces the risk of entrapment.
- Center cut-out in air bolsters enables safe ingress and egress from the mattress.
- 18 laser holes keep the patient cool and dry.
- Removable, water resistant, non-shear, antimicrobial nylon cover.
- Pillow top feature prevents head and neck from unnecessary movement during alternating mode.
- Optional raised side rails.
- **Weight Capacity: 350 lbs.**



## MATTRESS REPLACEMENT SYSTEM: Protekt Aire 4000dX-Alternating Pressure Low Air Loss Powered Mattress with Digital Pump

### FEATURES AND BENEFITS

- The Protekt® Aire 4000DX combines dual therapies of low air loss and alternating pressure in one unit. The 4000DX is ideal for patients who require treatment for pressure ulcers stages I-IV. The Protekt® Aire 4000DX pump alternates in 10-minute intervals and the adjustable LED digital air flow touch panel provides custom pressure settings for each patient's individual requirements.

### FEATURES AND BENEFITS

- PROTEKT® AIRE 4000DX PUMP.
- Extended 2 Year Warranty Digital Pump with Auto Compressor Sleep Technology (ACST) shuts off compressor at desired pressure level extending pump life cycle.
- Low air loss and alternating pressure therapies in one system.
- Digital adjustable LED weight settings allows pressure to be customized according to each patient's therapeutic requirements.
- Preset 10-minute alternating cycle.
- Static function for safe and easy patient transfer.
- Audio/visual low-pressure alarm indicates airflow may be compromised.

### MATTRESS & COVER

- 18 laser holes keeps the patient cool and dry.
- Nylon top cover is fluid resistant, anti-microbial/anti-bacterial and quilted for added comfort.
- Static head section prevents unnecessary head/neck movement.
- Optional raised side rails.
- **Weight Capacity: 400 lbs.**



## MATTRESS REPLACEMENT SYSTEM: 6500 - Low Air Loss/Alternating Pressure Powered

### FEATURES AND BENEFITS

- Dual compressor with 18 LPM (liter per minute).
- Alternating pressure cycles of 10, 15, 20 & 25 minutes allows clinicians to customize pressure redistribution and skin surface interface.
- Cell-on-cell mattress design prevents patient from bottoming out in case of power failure.
- 10" air cells are constructed of Nylon/PU for added comfort and support.
- Low air loss function controls and manages moisture to prevent skin maceration.
- 3 Audio/visual alarms; low pressure, power failure, and alternating failure alerts clinicians when preset pressure levels decrease.
- Seat inflate increases air flow by 20% to middle bladders to prevent bottoming out.
- Static mode allows for easy transfer in and out of bed.
- Pillow top feature prevents head and neck from unnecessary movement during alternating mode.
- Lock out feature prevents unauthorized changes to the pump settings.
- Nylon quilted top cover is fluid resistant, anti-microbial/anti-bacterial, vapor permeable and fire retardant.
- CPR pull tab quickly releases air from mattress.
- **Weight Capacity: 660 lbs.**

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## MATTRESS REPLACEMENT SYSTEM: 6400- Low Air Loss/Alternating Pressure Powered

### FEATURES AND BENEFITS

- The Protekt® Aire 6400 is the preferred treatment for stage I-IV pressure injuries and unstageable pressure injuries. The combination of **low air loss** and alternating pressure therapies provide an unparalleled pressure redistribution surface.

### PROTEKT™ AIRE 6000 PUMP

- Dual therapies; low air loss and alternating pressure.
- 4 alternating times of 10, 15, 20 & 25 minutes allows clinicians to customize therapy.
- Seat-inflate feature helps protect the patient when they are in the fowler position.
- Auto firm mode for quick inflation.
- Static mode provides firm support for egress or ingress from mattress or side edge seating.
- 3 audible and visual alarms; low pressure, power failure and alternating failure.
- Locking Pump

### MATTRESS & COVER (available in 84" length)

- 18 laser holes keeps the patient cool and dry.
- Nylon top cover is fluid resistant, anti-microbial/anti-bacterial and quilted for added comfort.
- Pillow top feature prevents head and neck from unnecessary movement during alternating mode.
- Available in 84" length.
- Optional raised side rails.
- **Weight Capacity: 450 lbs.**



## BARIATRIC 8000 SERIES LOW AIR LOSS STANDARD MATTRESS

### FEATURES AND BENEFITS

- Alternating pressure cycles of 10,15,20 & 25 allows clinicians to customize pressure redistribution and skin surface interface.
- Low air loss function controls and manages moisture to prevent skin maceration.
- Cell-on-cell mattress design prevents patient from bottoming out in case of power failure.
- 10" air cells are constructed of Nylon/PU for added comfort and support.
- Audible low-pressure alarms alerts clinicians when preset pressure levels decrease.
- Static mode allows for easy transfer in and out of bed.
- Pillow top feature prevents head and neck from unnecessary movement during alternating mode.
- CPR pull tab quickly release air from mattress.
- Warranty: 18 Month Non-Prorated
- Weight: 9 lbs.

### SPECIFICATIONS

- Air Volume: 15 liters per minute.
- Cycle Time: 10,15,20 and 25 minutes, selectable.
- Pump Weight: 8.8 lbs.
- Pump Dimensions: 13.4"x4.9"x9.7".
- Mattress Dimensions: 42"x80"x10", 48"x80"x10".
- Cell Depth: 10".
- UL/CSA approved power cord.
- Power: 120 VAC.
- Input Frequency: 60Hz.
- Pressure Range: 20-70 mmHg.
- **Weight Capacity: 650 lbs.**



# AIR/FOAM BASE SUPPORT SURFACE (MATTRESS) – GROUP II

Kustom Kinetics reserves the right to substitute products that are the same or similar in nature.



## PROTEKT NON-POWERED SUPREME SUPPORT SELF ADJ FOAM/AIR

### FEATURES AND BENEFITS

- The Protekt® Supreme Support utilizes a series of 10 interconnected air cells and pressure valves to continually equalize pressure in response to patient movement and position changes. The Equalization Technology automatically redistributes weight to relieve pressure by increasing body surface contact.
- The top foam layer of Visco Gel Polymer Technology (VGPT™) is an open cell visco memory foam infused with gel polymers. This VGPT™ provides rapid heat dissipation, excellent pressure redistribution and vastly increases breathability compared to traditional foam.
- The sloped heel section reduces pressure and increases blood circulation by redistributing the load from the heel to the less vulnerable lower leg.
- Stretch nylon top cover is fluid resistant, anti-microbial/anti-bacterial, breathable and fire retardant.
- The optional alternating pressure pump easily converts the Protekt® Supreme Support to a dynamic powered air mattress.
- **Weight Capacity: 500 lbs.**

## PROTEKT AIRE 3500: Low Air Loss/Alternating Pressure Mattress System with 3" Densified Fiber Support Base

### FEATURES AND BENEFITS

- The Protekt® Aire 3500 combines dual therapies of low air loss and alternating pressure in one unit. The durable & powerful, yet quiet user friendly pump is designed to treat UNSTAGEABLE TO STAGE IV PRESSURE INJURY (L89.100-L89.45).
- PROTEKT® AIRE 3000 PUMP.
- Low air loss and alternating pressure therapies in one system. Air flow dial offers custom patient comfort and pressure levels. Static function for safe and easy patient transfer. Preset 10 minute alternating cycle. Visual low pressure alarm indicates air flow may be compromised.
- **MATTRESS & COVER.**
- 5" mattress with 3" densified fiber base provides a safety support base in case of power failure. 18 laser holes keeps the patient cool and dry. Nylon top cover is fluid resistant, anti-microbial/anti-bacterial and quilted for added comfort. Pillow top feature prevents head and neck from unnecessary movement during alternating mode. Optional raised side rails. 36" x 80" x 8" Warranty: 18 Month Non-Prorated.
- **Weight Capacity: 350 lbs.**



# SUPPORT SURFACE (MATTRESS) – GROUP II CRITERIA

All medical equipment must meet clinical requirement & documentation for justification by an NP or Advanced Practice Clinician.

## Coverage Insights (LCD:L33642)

Pressure Reducing Support Surfaces  
HCPCS Code: E0277 and E0193

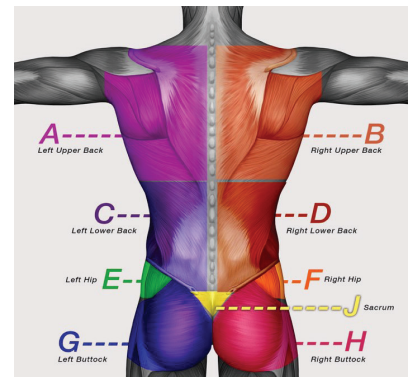
### Group II Support Surface (Mattress) is covered

1. The patient has multiple stage II pressure injuries OR large Stage III or IV Or Unstageable located on the trunk or pelvis AND
2. The patient has been on a comprehensive ulcer treatment program for at least the past month, which has included the use of an appropriate Group I support surface or currently on a Group II support surface.

### ICD 10 Mapping Codes: Group I ICD Codes – Pressure Injury Codes

L89 code extensions below (ex. L189.142)

Stage	A	B	C	D	E	F	G	H	J	U
0	120	110	140	130	220	210	320	310	150	100
1	121	111	141	131	221	211	321	311	151	101
2	122	112	142	132	222	212	322	312	152	102
3	123	113	143	133	223	213	323	313	153	103
4	124	114	144	134	224	214	324	334	154	104





# SUPPORT SURFACE (MATTRESS) – GROUP I

Kustom Kinetics reserves the right to substitute products that are the same or similar in nature.



## THE PROTEKT® GEL

- The Protekt® Gel Overlay utilizes a series of gel bladders encapsulated between high density, high resilient contoured foam and a firm support base. This composition creates a cost-effective pressure redistribution group I support surface.
- Optimal overlay surface for the prevention and treatment of pressure ulcers.
- Convoluted high density polyurethane foam top layer.
- 15 horizontal gel bladders prevents migration and bottoming out.
- Gel bladders contain an aqueous gel composition that provides deep immersion.
- Base foundation is a high density/high resilient foam construction which prevents bottoming out.
- Nylon top cover is fluid resistant, vapor permeable and anti-microbial/anti-bacterial.
- Bottom vinyl cover has 4 elastic corner straps that secures overlay to the mattress.
- Gel maintains room temperature at all times
- Warranty: 1 Year Non-Prorated.
- **Weight Capacity: 300lb**

## CRITERIA

All medical equipment must meet clinical requirement & documentation for justification by an NP or Advanced Practice Clinician.

### Pressure Reducing Support Surfaces

HCPCS Code: E0185

Gel or Gel-Like Pressure Pad for Mattress

### Mattress Overlay is covered

1. The beneficiary is completely immobile (Paraplegia G82.20..., Quadriplegia G82.50...)
2. The beneficiary has limited mobility (Reduced mobility Z74.0.09 or Z74.01) *AND* one of the following:
  - a. Nutritional deficiency (E63.9...)
  - b. Fecal or Urinary Incontinence (Urinary R32....., Fecal R15.9.....)
  - c. Altered Sensory Perception (R20.9...)
  - d. Compromised Circulatory Status (I98\*...)

### ICD-10 Codes

Paraplegia	G82.20
Quadriplegia	G82.50
Reduced Mobility	Z74.09 or Z74.01 and one of the following: Nutritional Deficiency E63.9 Urinary Incontinence R32 Fecal Incontinence R15.9 Altered Sensory Perception R20.9 Comprised Circulatory Status I98.8

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# WHEELCHAIR CUSHIONS

## STANDARD AND BARIATRIC

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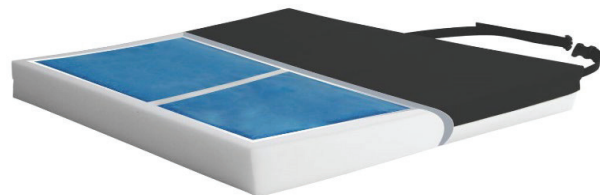


### GEL ANTI-THRUST/PROTEKT

- Anti-thrust barrier eliminates forward and sacral sitting problems.
- Helps in prevention and treatment of pressure sores.
- Dual compartment gel bladder design eliminates gel migration.
- High density polyurethane foam.
- Stretch nylon cover is comfortable, breathable and fluid resistant.
- Weight Capacity: 250 lbs. (16", 18", 20"); +500 lbs. (22", 24", 26")

### GEL-COCCYX/PROTEKT

- Helps in the prevention and treatment of pressure sores for your Bariatric patients.
- High density/high resilient foam combined with a gel bladder allows for deep immersion providing excellent pressure redistribution.
- Dual compartment gel bladder design eliminates gel migration.
- Cut-out design removes all pressure on the coccyx bone.
- Stretch nylon cover is comfortable, breathable and fluid resistant.
- Safety buckles keeps the cushion in place.
- Weight Capacity: 250 lbs. (16", 18", 20"); +500 lbs. (22", 24", 26", 28", 30")



### GEL WEDGE POMMEL/PROTEKT

- Wedge design helps prevent patient from sliding forward and improves posture.
- Pommel promotes proper hip positioning.
- Gel bladder allows for deep immersion providing excellent pressure redistribution.
- Firm foundation reduces pressure caused by sling-seat hammocking.
- High-density foam increases stability and comfort.
- Stretch nylon cover is comfortable, breathable and fluid resistant.
- Safety buckles keeps the cushion in place.
- Weight Capacity: 250 lbs. (16", 18", 20"); +500 lbs. (22", 24", 26")

### GEL-FOAM/PROTEKT

- Helps in prevention and treatment of pressure sores.
- High density/high resilient foam combined with a gel bladder allows for deep immersion providing excellent pressure redistribution.
- Dual compartment gel bladder design eliminates gel migration.
- Stretch nylon cover is comfortable, breathable and fluid resistant.
- Safety buckles keeps the cushion in place.
- Weight Capacity: 275 lbs.





### POSTIONING GEL-FOAM ULTRA/PROTEKT

- Two layers of high resilient foam provide increased comfort and decrease the probability of pressure sores for your Bariatric patients.
- Large radius bottom provides versatile surface for sling or flat seated wheelchairs.
- Gel infused top layer of visco memory foam provides unprecedented pressure redistribution and rapid heat dissipation.
- Dual compartment gel bladder design eliminates gel migration.
- Soft foam allows immersion of pelvis for comfort and stability.
- Medial and lateral side supports facilitates positioning.
- Trochanter cut outs facilitates proper pressure redistribution.
- Stretch nylon cover is comfortable, breathable and fluid resistant.
- Safety buckles keeps the cushion in place.
- Weight Capacity: 275 lbs-(500 lbs. Bariatric)



### GEL-WEDGE/PROTEKT

- Wedge design helps prevent patient from sliding forward.
- Gel bladder allows for deep immersion providing excellent pressure redistribution.
- Firm foundation reduces pressure caused by sling-seat hammocking.
- High-density foam increases stability and comfort.
- Wedge shape improves posture support.
- Stretch nylon cover is comfortable, breathable and fluid resistant.
- Safety buckles keeps the cushion in place.
- Weight Capacity: 250 lbs. (16", 18", 20"); +500 lbs. (22", 24", 26")



# WHEELCHAIR CUSHIONS CRITERIA

All medical equipment must meet clinical requirement & documentation for justification by a n NP or Advanced Practice Clinician.

## Coverage Insights (LCD: L33312)

### Skin Protection & Positioning Cushion

HCPCS Code: E2607/E2608

Wheelchair Cushion – Use both Group I and Group II Codes

Skin Protection & Position Cushion is covered if 1 of the 2 criteria are met:

1. There is an ulcer or history of pressure ulcers.
2. The patient has a history of positioning or seating problems.
3. Use both Group I & Group II Codes.

### Positioning Wheelchair Seat Cushion

HCPCS Code: E2605/E2606

Use Group II Codes

Patients that would benefit from this cushion:

1. The patient has positioning and/or seating problems.
2. The patient does not have a current or history of pressure ulcers.

### Skin Protection Wheelchair Cushion

HCPCS Code: E2603/E2604

Use Group I Codes

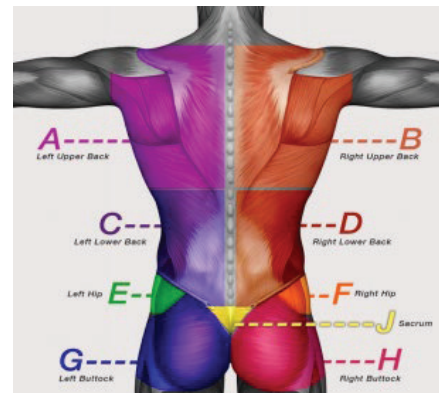
Patients that would benefit from this cushion:

1. The patient does not have a history of positioning or seating problems.
2. There is an ulcer or history of pressure ulcers.

## ICD 10 Mapping Codes: Cushions ICD Codes – Pressure Injury Codes

L89 code extensions below (ex. L189.142)

Stage	C	D	E	F	G	H	J
0	140	130	220	210	320	310	150
1	141	131	221	211	321	311	151
2	142	132	222	212	322	312	152
3	143	133	223	213	323	313	153
4	144	134	224	214	324	334	154



## Group II ICD Codes

Commonly Used Positioning and Seating ICD Codes

Disorders of the Brain	G93.89 – Depression F32.9, including loss of energy, delusions, eating and sleeping disturbances, etc.
Disorder of the Muscles	M62.89 – Fatigue R53.83, includes decrease in consciousness mental and or physical inertness, lack of vitality, low energy, drowsiness, tiredness, etc.
Hemiplegia	G81.00-G81.94
Paraplegia	G82.20 - G82.22
Quadriplegia	G82.50 – G82.54

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# NEGATIVE PRESSURE WOUND THERAPY PUMPS

Kustom Kinetics reserves the right to substitute products that are the same or similar in nature.



Negative Pressure Wound Therapy (NPWT) helps to heal your patients' wounds faster with fewer infections. It uses gentle vacuum pressure to remove fluid and infectious material from your patients' wounds. It also helps to draw the edges of your patients' wounds together and promotes the formation and growth of new tissue.

A special dressing is applied to the wound by a trained health care professional. The dressing is then connected to the pump which applies the vacuum. The dressing is changed every 72 hours. The canister, which collects the drainage can be changed weekly or sooner depending on the amount of drainage.

## CRITERIA

These products are not included under skilled nursing stay. They are only covered under a long-term Medicare Part B stay. All medical equipment must meet clinical requirement and documentation for justification by a Nurse Practitioner or Advanced Practice Clinician.

### Negative Pressure Wound Therapy Pump

HCPCS Code: E2402/A6550/A7000

Negative Pressure Wound Therapy Pump is covered if the beneficiary has:

1. A chronic Stage II, III, or IV pressure ulcer
2. Neuropathic (for example, diabetic) ulcer
3. Venous or arterial insufficiency ulcer
4. Surgical or traumatic wounds
5. Chronic (being present for at least 30 days) ulcer of mixed etiology

For application injury or wounds, the wound therapy program must include certain minimum measures, which should either be addressed, applied, or considered and ruled out prior to application of NPWT. Please contact your Kustom Kinetics Population Health Manager for a list of the general measures.



# SURGICAL DRESSINGS

## WOUND FORMULARY ALGORITHM

### Necrotic/Eschar Wounds

<b>Description</b>	Tissue death related to tissue ischemia. Appearance is often black or brown and has a dry leather-like texture.
<b>Optimal treatment</b>	Debride/remove eschar if circulatory status allows.

### Sloughy Wounds

<b>Description</b>	Devitalized tissue that is often moist and often yellow, white, or grey.
<b>Optimal treatment</b>	Remove slough to provide a clean base for granulation growth. Soften sloughy tissue by using hydrogel, honey, or other debriding agent.

### Granulating Wounds

<b>Description</b>	Wound base is red in color with a granular appearance related to capillary budding. May have drainage. Usually odor-free.
<b>Optimal treatment</b>	To promote and enhance granulation. Provide healthy base for epithelialization.

### Infected Wounds

<b>Description</b>	Infection occurs when bacterial load overwhelms the host immune response. Signs and symptoms of infection include erythema, induration, increased pain, increased drainage, malodorous, etc.
<b>Optimal treatment</b>	Resolve signs of infection and manage symptoms.



#### BORDERED GAUZE DRESSING

HEALQU® Bordered Gauze Dressing is a non-adherent, exudate absorbing gauze with a non-woven adhesive border that holds the dressing in place to cover, protect and cushion the wound.

Suggested Code: A6219 and A6220



#### BORDERED SILICONE FOAM DRESSING LITE

HEALQU® Bordered Silicone Foam Dressing Lite consists of a gentle silicone adhesive wound contact layer, a thin absorbent foam pad layer, and a vapor permeable and waterproof film. It is an ideal dressing for advanced wound exudate management.

Wound Types: ● ●

Suggested Code: A6212



# SURGICAL DRESSINGS



## BORDERED SILICON FOAM SACRUM DRESSING

HEALQU® Bordered Silicone Foam Sacrum Dressing has a silicone adhesive contact layer designed for gentle release, a super absorbent pad layer, and a vapor-permeable and waterproof film. The multi-layer construction facilitates dynamic fluid management to provide an optimal moist wound environment.

This foam dressing helps to maintain a moist healing environment, optimal for many different types of wounds. It can absorb 10+ times its weight as it draws exudate from the wound. The self-adhesive border requires no secondary dressing and can be used under compression bandages. The waterproof barrier seals the wound area and protects from external debris and bacteria.

Indications: Moderately to heavily exuding, partial-to full-thickness wounds, including trauma wounds, pressure injuries, diabetic injuries, leg ulcers, graft and donor sites, post-operative surgical wounds.

Wound Types: ● ●  
Suggested Code: A6213



## BORDERED FOAM DRESSING WATERPROOF ADHESIVE

HEALQU® Bordered Silicone Foam Dressing consists of a silicone adhesive wound contact layer, a super absorbent pad layer, and a vapor permeable and waterproof film. It is an ideal dressing for advanced wound exudate management

This foam dressing helps to maintain a moist healing environment, optimal for many different types of wounds. It can absorb 10+ times its weight as it draws exudate from the wound. The self-adhesive border requires no secondary dressing and can be used under compression bandages. The waterproof barrier seals the wound area and protects from external debris and bacteria.

Indications: Moderately to heavily exuding, partial-to full-thickness wounds, including trauma wounds, pressure injuries, diabetic injuries, leg ulcers, graft and donor sites, post-operative surgical wounds.

Wound Types: ● ●  
Suggested Code: A6212



## SILVER ALGINATE WOUND DRESSING

HEALQU™ Silver Alginate Dressing is comprised of natural fibers derived from seaweed. It is designed to be super-absorbent. The dressing absorbs exudates and forms a gel-like covering over the wound to maintain a moist environment for healing. The gel-like surface also prevents the dressing from adhering to the wound, so it is painless to remove. HEALQU™ Silver Alginate Dressing is composed of calcium alginate and silver particles. The silver content is 50µg/100 cm<sup>2</sup>. The silver particles are in the form of encapsulated metallic silver, which is stable and will not oxidize even when exposed to light.

HEALQU™ Silver Alginate Dressing can restrain the growth of bacteria and reduce infection.

Indications: Moderately to heavily exuding, partial-to full- thickness wounds, including trauma wounds, pressure injuries, diabetic injuries, leg ulcers, graft and donor sites, post-operative surgical wounds.

Wound Types: ● ● ●  
Suggested Code: A6196, A6197, A6199 (Silver Alginate)



## CALCIUM ALGINATE WOUND DRESSING

HEALQU™ Calcium Alginate Wound Dressing is made of natural fibers derived from seaweed and designed to be super-absorbent. Alginates absorb wound exudates and form a gel-like covering over the wound, maintaining a moist healing environment which accelerates healing and stops bleeding. The gel-like surface also prevents the dressing from adhering to the wound, so it is painless to remove.

Indications: Moderately to heavily exuding, partial-to full-thickness wounds, including trauma wounds, pressure injuries, diabetic injuries, leg ulcers, graft and donor sites, post-operative surgical wounds.

Wound Types: ● ●  
Suggested Code: A6196, A6197, A6199



# SURGICAL DRESSINGS



## GELLING FIBER WOUND DRESSING

HEALQU® Gelling Fiber Wound Dressing is a soft, conformable, highly absorbent wound dressing, which retains its structure when highly saturated. The dressing is composed of sodium carboxymethyl cellulose (CMC) and enhanced fibers which maintains a healing environment.

Wound Types: ● ●

Suggested Code: A6196, A6197, A6199



## HYDROCOLLOID DRESSINGS

HEALQU® Hydrocolloid Dressings absorb exudates from the wound and are permeable to both oxygen and water vapor but impermeable to bacteria. The dressing forms a protective gel that provides a moist wound environment for ideal healing, while minimizing tissue trauma and pain during dressing changes.

Wound Types: ● ●

Suggested Code: A6234



## HYDROCONDUCTIVE WOUND DRESSING

HEALQU® Hydroconductive Wound Dressing is a sterile dressing for use on moderate to heavily exuding wounds. This technologically advanced dressing consists of a top layer, a super absorbent storage layer that retains the exudate, and a hydroconductive absorption layer. The hydroconductive dressing provides superior absorption and locks exudates away. This minimizes the risk of maceration and damage to peri-wound skin.

Wound Types: ● ●

Suggested Code: A6196, A6197, A6199



## HYDROGEL IMPREGNATED GAUZE DRESSING

HEALQU® Hydrogel Impregnated Gauze Dressing is a hydrogel impregnated dressing on a soft, non-woven gauze pad. The dressing helps maintain a moist wound healing environment, promote granulation and epithelialization and promotes autolytic debridement. Dressing prevents dry gauze from coming into contact with the wound.

Wound Types: ● ●

Suggested Code: A6231



## HYDROGEL SHEET DRESSING

HEALQU® Hydrogel Sheet Dressing is a three-dimensional network of cross-linked hydrophilic polymers that are insoluble in water and interact with aqueous solutions by swelling. This dressing helps maintain a moist wound healing environment, promotes granulation and facilitates epithelialization, and autolytic debridement.

Wound Types: ● ●

Suggested Code: A6242



## HYDROPHILIC FOAM DRESSING

HEALQU® Hydrophilic Foam Dressing is composed of soft and highly absorbent polyurethane for use on heavily exuding wounds. The Hydrophilic dressing is vapor permeable and helps to maintain a moist wound environment for ideal wound healing.

Wound Types: ● ●

Suggested Code: A6209-A6210



## NON-ADHERENT HEEL DRESSING

HEALQU® Non-Adherent Heel Dressing is a conformable, hydrophilic, polyurethane foam dressing with a breathable film backing. Designed to fit around the heel, this dressing has excellent fluid handling properties and is ideal for use under compression bandaging due to its low profile and low friction film backing.

Wound Types: ● ●

Suggested Code: A6210



## NON-ADHESIVE WATERPROOF FOAM

This foam dressing is a multi-purpose, vapor permeable dressing helps to create the ideal environment for wound healing. The waterproof outer layer helps keep the wound area isolated from external bacteria. The latex-free, highly absorbent foam material quickly draws exudate from the wound bed for a high degree of fluid management.

Indications: Moderately to heavily exuding, partial-to full-thickness wounds, including trauma wounds, pressure injuries, diabetic injuries, leg ulcers, graft and donor sites, post-operative surgical wounds.

Wound Types: ● ●

Suggested Code: A6209, A6210





# SURGICAL DRESSINGS



## NON-WOVEN ADHESIVE BORDER FOAM DRESSING

This HEALQU® Foam Dressing with a non-woven adhesive border is a latex-free, foam pad that quickly absorbs exudates. The vapor permeable layers help create the ideal wound healing environment. The waterproof outer coating protects the wound from external bacteria.

Wound Types: ● ●

Suggested Code: A6212

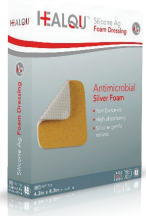


## SILICONE GENTLE FOAM DRESSING

HEALQU® Silicone Gentle Foam Dressing consists of a gentle silicone adhesive wound contact layer, a foam layer, and a vapor permeable and waterproof film. The multi-layer construction facilitates dynamic fluid management, providing an optimal moist wound environment to maximize healing. The gentle adhesive minimizes trauma and reduces pain during dressing changes.

Wound Types: ● ●

Suggested Code: A6209 and A6210



## SILVER ANTIMICROBIAL FOAM DRESSING

The Silicone Ag Foam dressing absorbs exudates, maintains a moist wound-healing environment, and provides antibacterial preservative properties. The Silicone Ag Foam Dressing contains 0.25 – 0.35mg/cm<sup>2</sup> silver ions. It has been shown that antibacterial preservative effectiveness within the dressing lasts for up to 7 days, as demonstrated in vitro.

Wound Types: ● ●

HCPCS: A6210 (silver foam dressing)



## TRANSPARENT DRESSINGS

HEALQU® Transparent Dressings are ideal for the protection of IV entry sites and stage one wounds. The thin, flexible film stays adhered to the skin to create a waterproof, microbial, and contaminant barrier while providing a breathable environment for the wound or IV site. The windowed frame allows the dressing to be applied precisely where needed.

Suggested Code: A6257 A6258 A6259



## WATERPROOF ADHESIVE BORDERED FOAM

This foam dressing helps to maintain a moist healing environment, optimal for many different types of wounds. It can absorb 10+ times its weight as it draws exudate from the wound. The self-adhesive border requires no secondary dressing and can be used under compression bandages. The waterproof barrier seals the wound area and protects from external debris and bacteria.

Wound Types: ● ●

Suggested Code: A6212 (Adhesive Waterproof Foam)



## XEROFORM GAUZE

HEALQU® Xeroform Gauze is an advanced wound care dressing intended for direct application to light or non-exuding wounds. The dressing provides a healing environment using a fine mesh coated with a petrolatum base containing 3% Bismuth Tribromophenate. The gauze will help maintain a moist wound environment and is non-adherent for ease of removal during dressing changes.

Wound Types: ● ●

Suggested Code: A6222 and A6223

## CRITERIA

These products are not included under skilled nursing stay. They are only covered under a long-term Medicare Part B stay. All medical equipment must meet clinical requirement and documentation for justification by a Nurse Practitioner or Advanced Practice Clinician.



# ORTHOTIC BRACING

Contact your Kustom Kinetics Population Health Manager for more information on Orthotics criteria.  
Kustom Kinetics reserves the right to substitute products that are the same or similar in nature.

## HANDS



### EASY CARE HAND

A lightweight WHFO without joints is designed for progressive treatment/correction of the moderately to severely contracted MPJs, PUPs, and DIPs by use of the three (3) graduated rolls.



### CARE LITE HAND

The Care Lite Hand is a fully adjustable, deviating hand orthosis that provides progressive, static positioning for the treatment of the mildly to severely contracted wrist, hand, fingers, and thumb.



### CARE MAX AIR HAND

The Care Max Air Hand provides support and treatment of wrist/hand contractures while simultaneously treating moderate to severely contracted fingers with prolonged low load stretch.



### CARE RESTING HAND "SPLIT FINGER"

The Care Resting Hand is a fully adjustable, deviating hand orthosis that provides progressive, static positioning for the treatment of the mildly to severely contracted wrist, hand, fingers, and thumb.

## ELBOWS



### RANGER ELBOW

The Ranger Elbow orthosis has an adjustable position locking joint ideal for elbow contractures to support protect and correctly position the elbow joint in maintaining gains achieved during ROM therapy and preserving existing ROM



### CARE REST ELBOW

The Care Rest Elbow orthosis has an adjustable position locking joint ideal for elbow contractures to support protect and correctly position the elbow joint in maintaining gains achieved during ROM therapy and preserving existing ROM



### CARE BENDABLE ELBOW

The Care Bendable Elbow is an easy-to-use bendable orthosis used for gradual extension of non-fixed contractures,



# KNEES



## RANGER EZ LOCK KNEE

The Ranger E-Z Lock Knee is a double upright metal hinged knee brace designed to provide progressive treatment and correction of knee flexion contractures in "non-ambulatory" patients.



## KKMP MIN-KNEE HINGED KNEE BRACE

Wrap around design for excellent fit and comfort. Provides mild to moderate medial and lateral support in addition to the support offered by the strapping. Polycentric hinge provides flexion/extension.

Stops at 0-15-30-60-90 Degrees.

Indicated for mild to moderate ligament joint instabilities. Provides support, stabilization and compression of the knee joint following ligament or meniscus injuries.



## RANGER AIR KNEE

The Ranger Air Knee has a one-piece liner made of moisture wicking material and is padded throughout.

# ANKLES



## CAREBOOT II D-FLEX

All CareBoot IIs are designed for systemic treatment of foot drop, internal and exterior hip rotation and pressure sores due to illness, trauma or immobility.



## CAREBOOT II SOFT HEEL

The new CareBoot II Soft Heel provides a passive resistance for the treatment of plantar fasciitis and Achilles tendinitis, relief of heel pressure for treatment and/or prevention of pressure sores, prevention and/or treatment of plantar flexion contractures.



## SoftPro In-Bed AFO

- Effectively treats plantar flexion
- Non-skid bottom for assisted transfers
- SoftPro™ Short Back In-Bed AFO available in all sizes
- Available smooth or fleece



# DIABETIC SHOES

Kustom Kinetics reserves the right to substitute products that are the same or similar in nature.



Kustom Kinetics is not only a leader in the orthotics industry, but we are a front runner in the diabetic shoe industry.

To order, contact your Kustom Kinetics Population Health Manager. We will verify the patient's insurance coverage by reviewing a patient demographic sheet and determine what style is best based upon the foot condition (i.e. wounds, swelling). A podiatrist or NP can provide a foot evaluation for insurance qualification. A simple tracing of the foot will assist in proper determination of size. The samples you see in this catalog are part of a larger collection you can view at [www.pedlite.com](http://www.pedlite.com).



# 2021 POPULATION HEALTH MANAGERS

NAME	PRIMARY PHONE	E-MAIL ADDRESS	TERRITORY	FAX
Shapley, Roland <i>CEO &amp; Director of Strategic Development</i>	901-619-8897	roland@kustomkinetics.com	<b>NATIONAL COVERAGE</b> <b>* Contact Roland if in doubt on which Population Health Mgr to call</b>	866-637-6864
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Rifenberick, Belinda	727-480-1550	belinda@kustomkinetics.com	Florida, Georgia, North Carolina	866-238-2249
Yates, Katie	504-275-9304	katie.yates@kustomkinetics.com	South Alabama, Colorado, Louisiana, Minnesota, Tennessee	866-637-6864



# ORDER FORM

## KUSTOM KINETICS

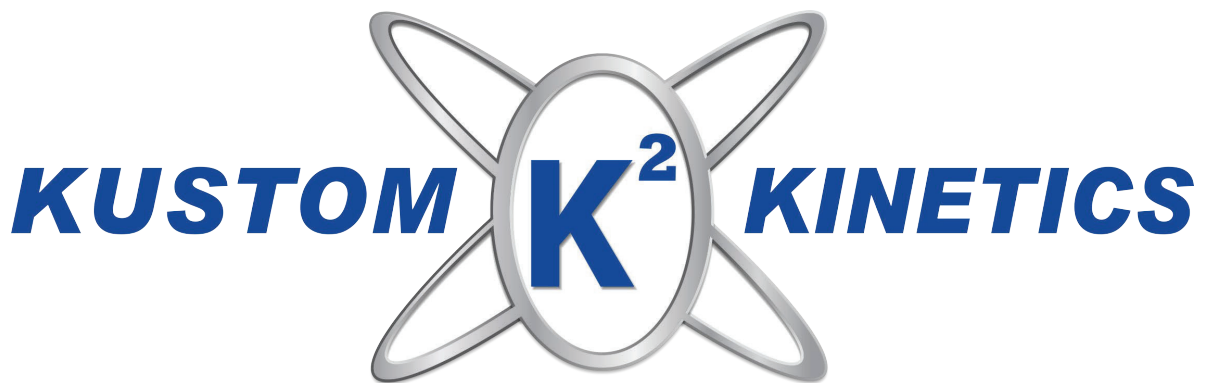
Hours: 8:30am-4pm  
Customer Service: 800-313-6468

E-POD  
c/Teleconsult

18 Olmsted St.  
Birmingham, AL 35242  
Fax: 866-637-6864

Rep Name	V. O. Date	P.O. #	Patient (Last Name, First Name)								
Primary Insurance #	Secondary INS #	D.O.B.	SEX	Facility Name							
Additional Insurance - Policy # - Phone# - Address				Ship To Address							
Responsible Party - Phone# - Address				Ship to City, State, Zip							
DX & ICD10 Code				Therapist/Nurse Attn:							
(Diabetic Shoe Qualifying Condition): ICD10				Facility Phone							
List any Skin Conditions:		List any Allergies to Materials:		Facility Fax							
<p>IS PATIENT CURRENTLY UNDER A SKILLED PLAN OF CARE (SNF PART A) YES ___ NO ___ DATE: _____</p> <p>Existing Patient ___ New Order ___ Replacement ___ Phone Order ___</p> <p>Potential for patient to benefit functionally from device: Good ___ Fair ___ Poor ___</p> <p>Therapy Plan of Care provided for orthotic(s)? Y ___ N ___ Duration of Need: _____</p> <p>Teleconsultation Visit Consent to Video/Record Y ___ N ___</p> <p>Is active ROM the plan for treatment? Y ___ N ___ Is there a non-fixed contracture with at least 10 PROM? Y ___ N ___</p> <p>Is the contracture/condition interfering w/patient's functional abilities? Y ___ N ___ Is the expected outcome to Treat &amp; Correct Contracture or Condition? Y ___ N ___</p> <p>Diabetic Shoes: I am treating this patient under a comprehensive plan of care for his/her diabetes within the last six months. Y ___ N ___</p>											
<table border="1"> <tr> <td colspan="2"><u>Circle One Below:</u></td> </tr> <tr> <td>UPS RED</td> <td>UPS 2ND DAY</td> </tr> <tr> <td>UPS 3RD DAY</td> <td>UPS GROUND</td> </tr> </table>						<u>Circle One Below:</u>		UPS RED	UPS 2ND DAY	UPS 3RD DAY	UPS GROUND
<u>Circle One Below:</u>											
UPS RED	UPS 2ND DAY										
UPS 3RD DAY	UPS GROUND										
QTY	CODE DESCRIPTION and \$	LT	RT	DEVICE DESCRIPTION & NOTES	MODEL #	VENDOR					
	Item #1 code \$										
	Item #2										
	Item #3										
	Item #4										
	Item #5										
	Item #6										
✓ inventory		NOTES:									
<b>RELEASE OF MEDICAL INFORMATION / ASSIGNMENT OF BENEFITS / HIPAA / SUPPLIER STANDARDS</b>											
<p>I request that payment of authorized Medicare, Medicaid and/or other private insurance benefits on my behalf be paid directly to MID SOUTH MEDICAL EQUIPMENT, INC for any services furnished to me by MID SOUTH MEDICAL EQUIPMENT, INC. I authorize any holder of medical information about me to release to the Centers for Medicare &amp; Medicaid Services and it's agents, any information needed to determine these benefits. I acknowledge that I have received a copy of the HIPAA Privacy Practices and the CMS Medicare DMEPOS Supplier Standards.</p>											
<p><b>Statement of Receipt of Product/Attestation of Following Information:</b> Signature at the bottom of this form attests that I or my caregiver have received, read and or been instructed in detail on the following information:          *With guidance and/or assistance from a MSME clinician/consultant substantial modifications were made to provide individual fit*</p>											
<b>RELEASE OF MEDICAL INFORMATION / ASSIGNMENT OF BENEFITS / HIPAA / SUPPLIER STANDARDS</b>											
Product as prescribed by my Physician Copy of my rights and responsibilities as a customer Upon request a detailed itemized statement will be provided Instructions on the proper use, care and cleaning procedures of my equipment Instructed on the Payment process of my equipment Plan of care and wear schedule has been established by thesp/ptnring Complaint Policy/Emergency contact Information			Satisfaction Survey provide feedback to Supplier Copy of product warranty HIPAA Privacy Notice Medicare Standards Product for pre-fab Orthotics will be delivered within 5 business days and custom work will arrive in about 4 weeks. If any delays we will notify you								
<b>Advanced Practice Clinician (APC) NAME:</b>		NPI #	PHONE	FAX							
<b>APC SIGNATURE:</b>		Order Date:	Delivery Date:								





**CONTACT US FOR MORE INFORMATION**

**P:** 800-313-6468 • **F:** 866-637-6864 • [ORDERS@KUSTOMKINETICS.COM](mailto:ORDERS@KUSTOMKINETICS.COM) • [KUSTOMKINETICS.COM](http://KUSTOMKINETICS.COM)

*K2ISNP APP*



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