




Member: \_\_\_\_\_ ID#: \_\_\_\_\_ Date: \_\_\_\_\_

Current Incontinence Product Worn by Member:



DAY:       Brief       Protective Underwear       Bladder Control Pad       None  
 NIGHT:     Brief       Protective Underwear       Bladder Control Pad       None

HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

- The right product will help meet incontinence needs based on time of day, flow and mobility
- Choosing the right size can help reduce leakage and decreased risk for skin irritation.
- If Bowel incontinent, a 4-Tab Brief is recommended.

Which of the below best describes the member's mobility when toileting?	Which of the below best describes the member's incontinence?				BOWEL INCONTINENCE
	A FEW DROPS	MORE THAN A FEW DROPS	SHORT STREAMS / SURGES	ALL AT ONCE	
	 <i>light</i>	 <i>moderate</i>	 <i>heavy</i>		
<b>MOBILE</b> <i>TOILETS THEMSELVES</i>	<input type="radio"/> Bladder Control Pad	<input type="radio"/> Bladder Control Pad	<input type="radio"/> Protective Underwear	<input type="radio"/> Brief	<input type="radio"/> Brief
<b>PARTIALLY MOBILE</b> <i>TOILETS WITH ASSISTANCE</i>	<input type="radio"/> Bladder Control Pad	<input type="radio"/> Bladder Control Pad <input type="radio"/> Protective Underwear	<input type="radio"/> Protective Underwear <input type="radio"/> Brief	<input type="radio"/> Brief	<input type="radio"/> Brief
<b>BEDBOUND - WHEELCHAIR</b> <i>NOT TOILETING</i>	<input type="radio"/> Brief	<input type="radio"/> Brief	<input type="radio"/> Brief	<input type="radio"/> Brief	<input type="radio"/> Brief

### Recommended Incontinence Products:

 <b>Day</b>	SIZE:	 <b>Night</b>	SIZE:		
	<input type="radio"/> Bladder Control Pad <input type="radio"/> Protective Underwear <input type="radio"/> Brief		Code:	<input type="radio"/> Bladder Control Pad <input type="radio"/> Protective Underwear <input type="radio"/> Brief	Code: