

#### The BioCon-500 Scanner is brought to you exclusively by Medline

In our commitment to bring you high quality products at a good value,

Medline has become the exclusive distributor of the

BioCon-500—the only portable, 3-D ultrasound device with a pre-scan feature.

The BioCon-500 is a quick, safe and non-invasive way
to measure bladder volume and post-void urinary retention.



### Medline Continence Management Program



Using the BioCon-500 can help facilities follow the Centers for Medicare & Medicaid Services (CMS) Tag F315. For extra help interpreting F315 and developing a continence program for your facility, ask your Medline representative about the Continence Management Program. It's a practical, hands-on resource to help you take the guesswork out of proper continence care. It also will educate your staff on best practices and help your facility to be "survey ready" all the time. Includes educational materials and up to 9 CE credits. The Program includes:

- Registered Nurse / LPN Workbook
- CNA Workbook
- Information for developing a comprehensive incontinence program that follows Tag F315 and MDS 3.0 guidelines
- Forms and guidelines to help document key continence issues (all forms also included on CD)

Contact your Medline representative or call 1-800-MEDLINE (1-800-633-5463) to learn more about how to take the guesswork out of developing an effective continence program.

#### SEE MORE ON BIOCON-500

- 1 Download a QR Code Reader app
- 2 Launch app
- 3 Hover the phone over this QR Code http://www.erasecauti.com/ bladder-scanner





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MKT211180 / LIT739 / 5M / SG25

# BioCon<sup>™</sup>-500 Scanner safely measures bladder volume.





## Effective incontinence management.

### Meet Tag F315 requirements.

### Minimize unnecessary catheterization.

Incontinence is widespread among the elderly population, especially those who live in nursing homes, where 50 percent or more of residents are incontinent.1 The BioCon-500 can be helpful in developing individualized urinary continence programs.

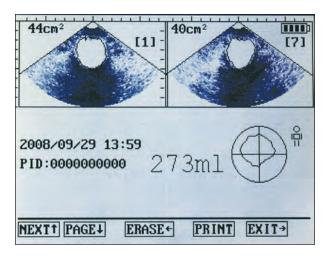
As part of a urinary continence program, the BioCon-500 Bladder Scanner allows caregivers to:

- Scan the resident's bladder to determine if catheterization or toileting is necessary.
- Show residents the results so they can actually see how much fluid is in their bladder. This helps residents re-learn the sensation of needing to urinate.
- Develop individualized toileting schedules based on each resident's bladder function pattern rather than at fixed times, such as every two hours. This will save staff valuable time.
- More accurately determine if a resident's bladder volume and voided amounts are consistently low, prompting an increase in the resident's fluid intake.

#### Promotes staff efficiency

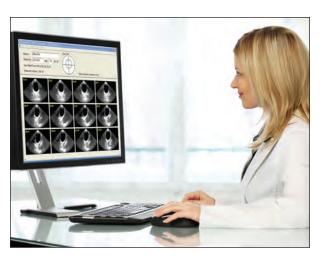
Unlike traditional ultrasound, the BioCon-500 requires little training. The portable unit is wheeled to the resident's bedside and the clinician applies clear gel to the resident's lower abdomen. The device's wand is then positioned over the bladder area. An image of the bladder appears on the screen, and the device calculates the bladder volume in less than five minutes.





#### Save time, increase accuracy with pre-scan feature

The unique pre-scan feature allows the clinician to view the bladder on the screen before the test begins. This feature improves accuracy by making sure the resident's entire bladder is being scanned. It also saves time by not having to redo an improper scan.



#### On-site printing and PC transfer

Results can be printed on the built-in printer to immediately show residents and families and for documentation in the chart. Results also can be transferred to a PC (via a USB-supported cable connection) for viewing, printing or saving—helping the caregiver quickly and easily document and track the resident's progress.

#### Comply with Tag F315

Using the BioCon-500 can help facilities follow the Centers for Medicare & Medicaid Services (CMS) Tag F315, which recommends PVR testing of residents at risk for incomplete bladder emptying.<sup>2</sup>

\*Not for fetal use or pregnant patients.

#### Resident benefits

- Minimizes the risk of catheter-related infection
- Helps preserve residents' dignity
- Reduces discomfort

#### Facility benefits

- Helps improve resident care
- May reduce the frequency of catheterization
- Saves staff time
- Decreases total expenses
- Little training necessary to use

**Technical Specifications** 

> Power 16V DC Adapter

(input: AC100-240V 50/60Hz); 7.4V Li-ion Rechargeable Battery

Power Consumption

Ultrasound Probe 3D Sector Scan. 2.8Mhz ultrasound

frequency, B-Mode Scan

Accuracy\* ±15%, ±15ml (0-999mL)

 $375(L) \times 240(W) \times 116(H)$ mm (2.86Kg) Dimension with W/T

5.6" STN LCD (320 × 240 pixels, 16 gray levels)

Maximum (ISPTA): ≤1mW/cm<sup>2</sup> Ultrasound Output

Maximum (ISPPA): ≤10mW/cm<sup>2</sup> Built-in (57mm paper width)

0 - 999mL Volume Range

USB 2.0 Basic Extended Interface

Transducer Diameter

Transducer Resonant Frequency Maximum Mechanical Index 0.5max

> Width 240mm (9.45 in) 375mm (14.76 in) Length

116 mm (4.57 in)

2.86 kg (6.07 lbs) with the battery installed

Consumables Battery Pack, Thermal Paper, Ultrasonic Gel

Mobile Stand Optional

Basket for Mobile Stand

Warranty

\*According to the scanning instruction, and on a Mcube Technology tissue-equivalent bladder phantom

BioCon-500 Bladder Scanner MDSB10500

Mobile Stand With Basket MDS3110100032

2 Year Extended Warranty MDSBSWARRANTY

MDS092005 Ultrasound Gel

Thermal Printer Paper MDSB10500PAPE

- 1. U.S. Department of Health & Human Services. Agency for Healthcare Research and Quality. Urinary Incontinence in Adults: Clinical Practice Guideline Update, Available at: http://www.ahra.gov/clinic/ujovervw.htm, Accessed September 22, 2009.
- 2. U.S. Department of Health & Human Services. CMS Manual System Pub. 100-07 State Operations Provider Certification. Transmittal 8. June 28, 2005. Changes in Manual Instructions: Tag F315/Guidance to Surveyors - Urinary Incontinence. Available at: http://www.cms.hhs.gov/transmittals/downloads/r8som.pdf. Accessed September 22, 2009.



