

Name \_\_\_\_\_ Date: \_\_\_\_\_

In order to evaluate this patient's need for incontinent supplies please provide answers to the following questions:

1) Please provide **diagnostic** directly related to client's incontinence. What is/are the medical reason(s) causing the incontinence?

2) **What are the client's daytime symptoms?**

- Urine incontinent
- Bowel leakage
- Small loss
- Moderate loss
- Heavy or continuous loss

3) **What are the client's night time symptoms?**

- Usually dry at night; no diaper change required
- Often dry at night...one change required
- Heavy urine loss...requires 2 or more changes during the night

4) How many pull ups is client using per 24 hours?

5) Is this condition expected to be permanent or temporary?

6) Does client live at home or in a Provincial Facility?

7) Is the client going to school or to work in a special need environment workplace?

8) Would a commode chair be of use?

9) Has this client been seen by an urologist?

**Additional Information**

150/month    Liners <\$1.00    Diapers \$1.50    Children's diapers <\$1.00

**CHECK NIHB WEBSITE as criteria may change**

Manufacturers of incontinence supplies have charts that indicate the maximum absorbency of each of their products. Different products are available for clients with different needs and it is important that the product be chosen according to the manufacturers' absorbency charts. Today's incontinence products are made with wetness indicators, refastenable tapes and a leakage barrier technology that keeps the wetness inside the disposable underwear or undergarment and away from the skin. If the product is chosen according to the absorbency needed by the client and the product is used to its full potential, a maximum of 4-5 incontinence supplies per day should meet the child's needs. No medical justification has been provided for the use of 8 diapers per day and therefore, based on the information received, a maximum of 5 diapers per day has been approved.

The NIHB Program will fund 4-5 incontinence supplies per day.

The request for incontinence supplies is in keeping with this child's medical and hygienic needs. NIHB covers a maximum of 5 incontinence products per day. However, 7 diapers per day have been approved as an exception due to the fact that Brendon is also incontinent of stools 4 times per night which could justify the extra diapers requested. The writer believes the child's bowel movements patterns are likely to decrease and consequently have his incontinence needs reduced to 4-5 diapers per day when utilized as per manufacturer's recommendation. Please forward an update on the client's incontinence pattern with your next request in 3 months time.

Each person's incontinence is unique due to contributing factors such as diet, medications, illness, bladder size, mobility etc. The appropriate absorbency with skin friendly products should always be used. Diapers come in a range of absorbencies. Normal urine output varies between 700 to 2000 ml per 24 hours. A product should be chosen that will meet the client's absorbency needs within the number of diapers that NIHB will fund - 4 to 5 per day.

A regular Depends diaper will hold 375 ml of fluid. Depends Super Plus absorbency adjustable underwear holds 800 ml and the Depends fitted maximum protection holds 1250 ml. Tena Ultra briefs can hold 1000 ml.

Modern super absorber diapers have an inner core of polymers that lock fluids away in a gel for maximum protection.

Moisture is rapidly wicked away from the skin and trapped in the lower core even after repeated re wets.

The quantity of incontinence products approved has been determined based on the additional information received which suggests that the client's medical and hygienic needs can be met with 4 diapers per day.

Caregivers must use these products wisely and be informed in correct product application and aware to use the product to its full absorbency potential. It is still recommended in LTC to toilet residents regularly, even though they are incontinent.

The price quoted is reasonable

One in four women, middle-aged or older, experience incontinence. There are exercises, supportive devices, and minimally invasive surgical solutions for Stress Urinary incontinence (SUI), the most common form of UI. There are medications for Urge Urinary Incontinence and products to help manage the condition. Incontinence is widespread, but it can be treated, more effectively managed and often cured. Please kindly answer the following questions with you next request

- What is the medical condition causing the incontinence?
- How long has this been a problem?
- Has the client been seen by an urologist, urogynecologist, physiotherapist, Nurse Consultant Adviser (NCA). Any follow ups?

If client has another medical condition that requires a checkup then perhaps a consultation with a Nurse Consultant Advisor (NCA) could be arranged at the same time. To find a Nurse Continence Advisor in your area, contact the Canadian Continence Foundation or the Canadian Nurse Continence Advisor Association at [www.cnca.ca](http://www.cnca.ca).

NIHB MS&E  
Review Nurse:

**NIHB Internal Notes (please indicate pertinent information for NIHB and if provider was contacted):**