**York Teaching Hospital NHS Foundation Trust**

**York and Selby Locality Assessment Date:**

**Patient Type:** New Patient [ ] Reassessment [ ] Suspend [ ] Remove [ ] Deceased [ ] **NAME OF CARE HOME**

**PATIENT NAME: NHS NUMBER:**

**DATE OF BIRTH**:

**Assessor Assessor Contact Number**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| ***Product Description*** | | ***Size / Working Absorbency*** | ***Inner Packaging*** | ***Pads / 24 Hours*** |  | ***Product Description*** | | ***Size / Working Absorbency*** | ***Inner Packaging*** | ***Pads / 24 Hours*** |  | ***Product Description*** | | ***Size / Working Absorbency*** | ***Inner Packaging*** | | ***Pads / 24 Hours*** |
| ***RECTANGULAR PADS*** | | | | | ***TENA Slip*** | | | | |  | | | | | |
|  |  |  |  |  | Slip PRF Image | Plus Small | 50 – 80cm | 30 |  |  |  |  |  | |  |
| **TENA Comfort** | | | | | 700mls |  |
| Comfort Mini PRF Image  Comfort Normal PRF Image |  |  |  |  | Plus Medium | 70 – 110cm | 30 |  | Attends Slip Extra Large (Special Care) | 150 – 175 cm | 14 | |  |
| Mini Super | 400mls | 28 |  | 900mls |  |
|  |  |  |  | Plus Large | 100 – 150cm | 30 |  |  |  |  | |  |
| Plus | 650mls | 46 |  | 1000mls |  |
| Extra | 800mls | 40 |  | Super Small | 50 – 80cm | 30 |  |  | | | | | |
| Super | 950mls | 36 |  | 750mls |  |  |  |  | |  |
| Maxi | 1300mls | 28 |  | Super Medium | 70 – 110cm | 28 |  |  | | | | | |
|  | | | | | 1000mls |  | | | | | |
| **PLEASE REMEMBER -**   * **PATIENTS WILL ONLY BE ALLOCATED 4 PRODUCTS PER 24 HOURS** * **ONLY 2 MAXI PRODUCTS WILL BE ALLOCATED PER 24 HOURS FOR EACH PATIENT** | | | | | Super Large | 100 – 150cm | 28 |  | **OTHER PRODUCTS**  **(Discuss with Continence Nurse before completion)** | | | | | |
| 1150mls |
| **AUTHORISED BY (MEMBER OF BLADDER AND BOWEL TEAM ONLY):** | | | | |  | | | |  | |
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