HidraWear

REDEFINING PATIENT LED WOUND CARE

HidraWear is the worlds first **HS specific** wound care product designed to make managing HS drainage quick and easy, and completely adhesive free. It is a unique Wearable Wound Care system for the management of wounds in difficult to dress areas, such as the under-arm region, or buttocks, groin & upper thigh.

Our **NEW** dressing retention system combines reusable garments with a super absorbent dressing requiring no adhesive and is secured using our patented HidraHex technology.

Each garment utilizes our patented HidraHex technology to enable patients to easily change their dressing day or night

HidraWear Garments Incorporate:



HidraHex

The hexagon pattern is designed to minimize leaks and strike through while remaining fully breathable & promoting wicking.



SeamSense

All HidraWear garments incorporate outward facing seams in traditional areas of high friction. This ensures a super soft skin contacting surface where it matters most, reducing risk of irritation to provide smooth movement.



Easy On

HidraWear Garments are specifically designed to be easy to get on and off, with the women's underarm crop top incorporating a front closing clasp



AeroSilk

All HidraWear garments are made of a premium micro modal and elastane blend fabric that is soft and breathable.



TrueFit

Adjustable straps in the women's underarm crop top enable a tailored fit.

Retention Dressing System includes a washable garment and non adhesive super absorbent dressings HidraWear

\varTheta HidraWear

HidraWear Dressing

3 x 5 inch super absorbent dressing that locks away moisture from the wound while protecting clothing and bed-linen from exudate strike through. **HidraHex Hook & Loop** retention technology secures the dressing in place without use of any adhesives.

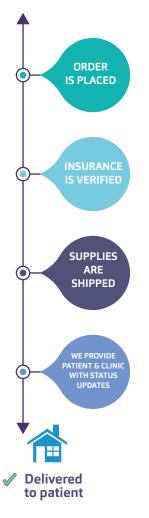




HidraWear can now be prescribed to your patients, with their monthly supply delivered directly to their home

Simply fill in the order from on page 3 & email or fax along with your patient info page (See right for filled in example)

How It Works:



	Clinic Name]	Woi)) un	Rotec dCare Compl	h		θ	Η	idı	a	Ve	ar						
	Clinic Phone 123-456-	90	FAX # (866) 220-8963																	
				Fax or email* with Patient Information Sheet orders@rotech.com Phone # (888) 711-2014									1							
	Order Date: //-2	-2022				l	AE Name					AE ID	#							
	Have patient's wound	/s ever been deb				Is patient curr	ently s	een by	Home	e Healt	:h?	C	YES	INO						
ICD-10	L73.2-Hidradentis suppuration	va L98.499-Non-pr ulcer c		L98.419-Non-p ulcer of ski	n / Buttocks															
7	ICD-10 (See ICD-10 legend above)					Wound Thickness (HidraWear dressing requires Full)			LOCATION			Wound Size (cm) (L x W x D)			Drainage (Exudate) HidraWear Dressing requires M - H					
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	Crop Top		Small	Medium	Larg	X-Large	XX-Larg	e		HidraWear is the first and only										
		Bust (Inch)	32-36 36-40		49 44	44-48	48-52	-	der		Hidradentis Suppurativa (HS									
	G	Waist (Inch)	24-28	28-32	-36	36-40	40-44		tor	wound dressing system, intended for										
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Garment Sizing	100		Small	Medium	Large	X-Large	XX-Larg	e	with	such as the armpit, buttocks & groin.										
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arme	Women's Shorts Bias decision to hip size - If b						rović	washable garment along with												
G	Women's Shorts Bias decision to hip size - if b Small Median					je X-Large XX-Large t				ergonomically designed single-use										
	Waist (Inch		24-28	28 52	32-36	36-40 40-4		-	me	wound pads that come with a										
		35 - 391/2	39 - 431/2	431/2 - 471/2	47 ^{1/2} - 51 ^{1/2}	51 ^{1/2} - 55 ^{1/2}		e Gai	patented dressing fastener.											
	Men's Shorts Bias decision to hip size - If b					between sizes, downsizing is			preferred 6			HidraWear is clinically proven to								
	A State		Small	Medium	Large	X-Large	XX-Large		*	assure secure dressing retention without the use of adhesives										
		Waist (Inch) Hip (Inch)	30-34 35 - 39 ^{1/2}	34-38 39 ^{1/2} - 43 ^{1/2}	38-42 43 ^{1/2} - 47 ^{1/2}	42-46 47 ^{1/2} -51 ^{1/2}	46-52 51 ^{1/2} -55 ¹	/2		witi	iouti	ine u	56 01	aun	esive	5				
		rnp (men)	33-33	32 - 43	43 - 47		51 - 55													
	Wound Care p		Drainage	Max Units		Frequency of Change Daily unless Spec.	Wound Num Wound Woun				ber (✓ for supplies)									
S	(Please Check		Required	per Monti	h		#1	#2	#3	#4	#5	#6	#7	#8						
PLIE	Hidrawear Garment (Circle style and size on sizing chart above					-	**			1	1									
SUP	Hidrawear Dressing P Carboflex: (4x4) (with garment)	Mod/Heavy Mod/Heavy	30 30			1	1	<u> </u>	-	<u> </u>									
DNI								-					-							
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	Johnson, MD	Johnson, MD					_			Treating Practitioner MUST check mark their respective box										
	□ NPI# 987654321 □ NPI# □ NPI#					□ NPI# □ NPI#			# PI# respective						ctive bi	ж				
	* I request that payment of my my home cannot be returned acknowledge receipt and under	y insurance benefits for if opened. I authorize	c. I am responsible for any balance due that is not covered by my insurance. I understand any product received in to Rotech HealthCare Inc. any information needed to determine benefits payable for these supplies or services. I all patients.											ved in ces. 1						
TURE		Patient Signature*:								Date: //-2-2022										
SIGNATURE	attest by my signature that it is my intention for the prescription to remain valid until the diagnosis described is resolved or otherwise directed by the digner. The requested supplies are medically necessary and the wound(s) has/have been debrided and/or surgically created or modified. I have nstructed the patient on how to use the supplies being requested.								e directed by the ed. I have	Duration of Treatment will be 90 Days unless specified:										
	X Practitioner					Signe	d	_	-2-											
* If emailing, please use encrypted/secure email. Communications via unencrypted email are not secure and there is a possibility PHI may be misdirected or internet.																				

Size Matters:

For best user experience please ensure you take your measurements prior to selecting a size. If in between sizes, downsizing is typically recommended. If you are unsure of your size, please take the time to contact our customer care team - call toll-free (888) 711 2014 or email hidrawear@rotech.com

For further support please contact us on Call: (888) 711 2014 Email: hidrawear@rotech.com

Rotech WoundCare Complete is an authorised distributor for HidraWear

NOW AVAILABLE ON PRESCRIPTION

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	Clinic Phone			would		ele												
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	Order		T					AE Name	tech.com Phone # (888) 711-2014									
	Date:							, in the manner										
	Have patient's wound/	/s ever been deb	rided?	YES N	0			Is patient cur	rently s	een by	/ Home	e Healt	h?		YES	NO		
ICD-10	L73.2-Hidradentis suppurativa	a L98.499-Non-p	ressure chronic of skin	L98.419-Non-p ulcer of ski	ressure chron n / Buttocks	ic									_			
z	ICD-10 (See ICD-10 legend above)					Thickness ear dressing ires Full)	LO	Wound Size(cm) (L x W x D)			nii	Drainage (Exudate) HidraWear Dressing requires M - H						
INFORMATION	Wound 1:	Parti	al Full						N	L		м	Н					
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	Bust		Small	Medium	Large	X-Large	XX-Large	5										
	Waist	Bust (Inch) Waist (Inch)	32-36 24-28	36-40 28-32	40-44 32-36	44-48 36-40	48-52 40-44	orde	wound dressing system, intended fo									
Garment Sizing	Unisex T Bias decision to chest size -						-	Garment provided with first order	use by people with wounds in									
			Small	Medium	Large	X-Large	XX-Large	,ith_	difficult to dress areas of the body such as the armpit, buttocks & groin.									
	Chest	Chest (Inch) Waist (Inch)	34-38	38-42	42-46	46-50	50-56	eq										
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Ga	Women's Shorts		-	L .	es, downsizing is		it pr	ergonomically designed single-use										
		Waist (Inch)	Small 24-28	Medium 28-32	Large 32-36	X-Large 36-40	XX-Large 40-44	- Jan	wound pads that come with a patented dressing fastener.									
	C.C.	Hip (Inch)	35 - 391/2	39 ^{1/2} - 43 ^{1/2}	43 ^{1/2} - 47 ^{1/}	² 47 ^{1/2} - 51 ^{1/2}	51 ^{1/2} - 55 ^{1/2}	Gar										
	Men's Shorts	Bias decision	n to hip size - If	between size	es, downsizing is	preferred	One	HidraWear is clinically proven to										
	Waist		Small	Medium	Large	X-Large	XX-Large	* *	assure secure dressing retention without the use of adhesives									
		Waist (Inch) Hip (Inch)	30-34 35 - 39 ^{1/2}	34-38 39 ^{1/2} - 43 ^{1/2}	38-42 43 ^{1/2} - 47 ^{1/}	42-46 ² 47 ^{1/2} -51 ^{1/2}	46-52 51 ^{1/2} - 55 ^{1/2}	-										
	J	1		1		1		Wound Number (✓ for supplies)										
S	Wound Care p (Please Check I		Drainage Required	Max Units per Wound per Month	Frequency of Change Daily unless Spec.					_	Wound Wound							
SUPPLIES	Hidrawear Garment (Circle style and size on sizing chart about the Hidrawear Dressing Pad Super Absorbent (5x3) (recommended)					- Mod/User	**		<u> </u>		-							
	ū	(6x8) (6x8)	JEIL (3X3)	recommended	with garment)	Mod/Heavy Mod/Heavy	30 30				+			-				
DRESSING	Xeroform: (2x2) (4x4) (5x9)					-	30											
	Telfa Non-Adherent Pad: (2x2) (4x4) (4x5) (4x8) Other Gelling Fiber Super Absorbent: (2x2) (4x4) (6x6) (8x8)					-	30											
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N	NPI#	NPI# NI			٩	IPI#	NPI	#	NPI#				Treating Practitioner MUST check mark their respective box					
	* I request that payment of my insurance benefits for any supplies be made to Rotech Healthcare Inc. I am responsible for any balance due that is not covered by my insurance. I understand any product received in my home cannot be returned if opened. I authorize any holder of my medical information to release to Rotech Healthcare Inc. any information needed to determine benefits payable for these supplies or services. I acknowledge receipt and understanding of the patient rights that Rotech Healthcare Inc. provides to all patients.													ived in ices. I				
TUR	Patient	Signature*:							Date:									
SIGNATURE	I attest by my signature that it is signer. The requested supplies a instructed the patient on how t	are medically necess	ary and the wo						Duration of Treatment will be 90 Days unless specified:									
	X Practitioner S	ignature:							Signe Date									

What is needed to process an order?

The following information is a general checklist of the items required on a standard written order (Rotech form or any written order) by most insurance plans, including Medicare.



Qualified Wound Is Present

Medicare covers surgical/wound dressings when a qualifying wound is present. CMS defines a qualified wounds as either of the following:

- A wound caused by, or treated by a surgical procedure
- After debridement of the wound, regardless of the debridement technique

Document debridement TYPE used to remove devitalized or necrotic tissue from wound (examples given are not all-inclusive):

Surgical: sharp instruments or laser

- Mechanical: irrigation or wet-to-dry
- Chemical: topical application of enzymatic agents

Autolytic: application of an occlusive dressing to open wound



Wound Information

- Type of wound(s) or ICD-10 Codes
- Location of each wound
- Size of wound(s) in cm (L x W x D
- Amount of exudate



Provider's Information

Provider's name and NPI
If unable to obtain signature when order is placed, please note where signature request should be sent (if it is different than clinic)

How easy is it to order and have supplies shipped to patients?

- Rotech's one-page order form takes just 45 seconds to complete. (...yes we timed it!)
- As an added bonus, Rotech is an option when ordering via iHeal, Wound Expert & Intellicure.

How quickly are supplies delivered?

• With the exception of a PO Box address, orders are shipped and delivered within 24-48 hours

What if Rotech is not contracted with a patient's insurance plan?

- In most cases, Insurance is verified within an hour of receiving the order, and once approved, supplies ship the same day.
- If Rotech is not contracted with a patient's plan, we will do our very best to find a company that is, notifying you along the way!

Treatment Plan

- Type of dressing to use
- Size of the dressings
- Amount to be used at one time
- Frequency of the dressing change
- Expected duration (up to 90 days)



3

Patient's Demographic Info / Face Sheet

Having this information right away allows us to begin verifying insurance benefits and helps avoid any delays in shipment.

Will Rotech substitute products when I request brand specific products?

- Brand specific products will not be substituted for a lesser product.
- If there is a reimbursement issue or a product is not available, our team will confirm any changes with you prior to shipping supplies.

Our staff does not have time to deal with unnecessary phone calls. Is this something we should expect?

- Not only does our team value your time but we respect it. You are unlikely to receive any calls from us unless we are returning a call to you.
- Our team will fax order updates to confirm shipment and make you aware of any delays.