

CHOOSING THE RIGHT Friction Reducing Device

SLIDER	TYPE OF TRANSFER	PATIENT MOBILITY ASSESSMENT
Arjo Orange Tube	Bed boosts, Patient Turns, Side to Side Inserting X-ray Chair boost Sling leg pieces	Use if patient has ability to move at least one leg, can bridge, and is able to push
Arjo Purple Sheet	Bed Boosts, Patient Turns, Side to Side, or Lateral Transfer,	Use if patient cannot assist or has limited ability to assist
Arjo Blue Tube	Patient Turns, Side to Side, or Lateral Transfers: i.e. bed to bed/stretcher	Use if patient cannot assist or has limited ability to assist
Arjo 1½ Blue	Same as purple sheets	Use if patient wider than purple sheet (see below)
Arjo Double Orange	Same as purple sheets	Use if patient wider than blue sheet (see below)
Bed Sheet (Breeze)	Bed Boosts, Patient Turns	Use if patient cannot assist in transfer
Samarit Roller Board	Lateral Transfers	Use if patient cannot assist in transfer
AirAssisted Device (eg Hovermatt)	Lateral Transfers	Use if patient cannot assist in transfer

- **All patient handling equipment should be inspected prior to use. Follow manufacturer's guidelines for care, cleaning and inspection.**