

Flo F3



Any questions, feel free to ask

Name:		Department:	
Date:		Product:	
ABM:		Patient Population/ Characteristic	
Hospital:		Device use on:	

1 On a scale of 1-5, clinically, how easy is it to use the device to meet its intended use?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
2 Is the IFU clear and easy to follow?				
<input type="checkbox"/> Yes	If no, please detail			
<input type="checkbox"/> No				
3 Are the necessary cleaning procedures clear and easy to follow?				
<input type="checkbox"/> Yes	If no, please detail			
<input type="checkbox"/> No				
4 On a scale of 1-5, how easy is it to inflate the F3 Pads?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
5 On a scale of 1-5, how easy is it to deflate the F3 Pads?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
6 On a scale of 1-5, how easy is it to place / fit the F3 Covers from underneath the patient?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
7 On a scale of 1-5, how easy is it to remove the F3 Covers from underneath the patient?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
8 On a scale of 1-5, how easy is it to place the F3 Pads underneath the patient?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
9 On a scale of 1-5, how easy is it to remove the F3 Pads underneath the patient?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
10 On a scale of 1-5, how do you rate the overall clinical performance of the device?				
<input type="checkbox"/> 1. Excellent	<input type="checkbox"/> 2. Very good	<input type="checkbox"/> 3. Good	<input type="checkbox"/> 4. Average	<input type="checkbox"/> 5. Poor
11 On a scale of 1-5, how easy is it to open the inlet valves?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
12 On a scale of 1-5, how easy is it to close the inlet valves?				
<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult

13	On a scale of 1-5, how easy is it to orientate the device for use?				
	<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
14	On a scale of 1-5, how does the device perform to assist in repositioning, turning and/or lateral transfer of a patient?				
	<input type="checkbox"/> 1. Excellent	<input type="checkbox"/> 2. Very good	<input type="checkbox"/> 3. Good	<input type="checkbox"/> 4. Average	<input type="checkbox"/> 5. Poor
15	On a scale of 1-5, how does the device perform to enable insertion or removal of patient handling device(s)?				
	<input type="checkbox"/> 1. Excellent	<input type="checkbox"/> 2. Very good	<input type="checkbox"/> 3. Good	<input type="checkbox"/> 4. Average	<input type="checkbox"/> 5. Poor
16	On a scale of 1-5, how does the device perform to enable insertion or removal of items underneath the patient?				
	<input type="checkbox"/> 1. Excellent	<input type="checkbox"/> 2. Very good	<input type="checkbox"/> 3. Good	<input type="checkbox"/> 4. Average	<input type="checkbox"/> 5. Poor
17	Do the Bariatric and standard bed alignment lines aid positioning of the patient?				
	<input type="checkbox"/> Yes	If no, please detail			
	<input type="checkbox"/> No				
18	On a scale of 1-5, how easy is it to reposition, turn or laterally transfer a patient using the Flo F3?				
	<input type="checkbox"/> 1. Very Easy	<input type="checkbox"/> 2. Easy	<input type="checkbox"/> 3. Average	<input type="checkbox"/> 4. Not Easy	<input type="checkbox"/> 5. Difficult
19	Since using the Flo F3, has a plateau or reduction in manual handling injuries been observed?				
	<input type="checkbox"/> Yes	If no, please detail			
	<input type="checkbox"/> No				
20	Does the Flo F3 reduce patient and user contact, in comparison to other standard methods and/or devices used for insertion / removal of patient handling device(s) and/or items underneath the patient, and those used to assist in patient repositioning, turning and/or lateral transfers?				
	<input type="checkbox"/> Yes	If no, please detail			
	<input type="checkbox"/> No				
21	Does the Flo F3 reduce procedure time, in comparison to other standard methods and/or devices used for insertion / removal of patient handling device(s) and/or items underneath the patient, and those used to assist in patient repositioning, turning and/or lateral transfers?				
	<input type="checkbox"/> Yes	If no, please detail			
	<input type="checkbox"/> No				
22	Does the Flo F3 improve patient dignity, in comparison to other standard methods and/or devices used for insertion / removal of patient handling device(s) and/or items underneath the patient, and those used to assist in patient repositioning, turning and/or lateral transfers?				
	<input type="checkbox"/> Yes	If no, please detail			
	<input type="checkbox"/> No				

If you have marked any of the questions above with a score of 3-5, please provide an explanation of why the score has been given, including any suggestions in relation to improvement to the device or accompanying labelling.	
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Further Comments:	
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