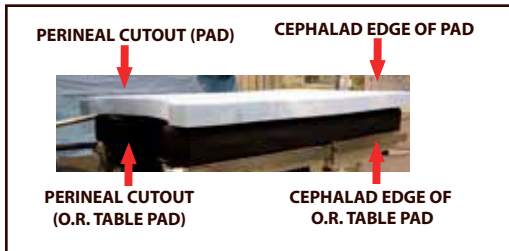


Instructions for Use Steep Trendelenburg Positioners

The purpose of Prime Medical foam single-patient-use, anti-skid device is to prevent patient movement during surgical procedures requiring Trendelenburg positioning, used by medical professionals on adult patients.

Open package and unroll STP pad on the O.R. Table.

Orient the pad so that the cephalad edge of the pad is even with the cephalad edge of the O.R. Table pad. The perineal cutout on the pad will help with orientation and should be aligned with the perineal cutout on the O.R. Table pad.

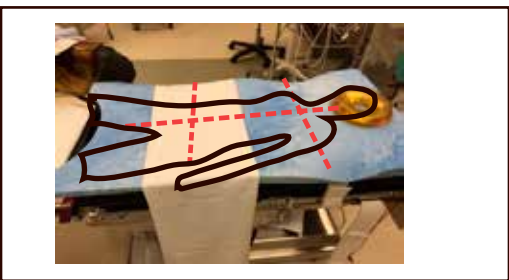


Lay the STP pad directly on top of the O.R. Table pad and ensure that there are no other materials between the STP pad and the O.R. Table pad.



Maximum skin contact with the STP pad provides the greatest stability for the patient in Trendelenburg, reverse-Trendelenburg or Lateral positioning.

If using a draw/lift sheet, place the sheet on top of the STP pad and make it as narrow as possible to ensure maximum skin contact with the pad. Place the draw/lift sheet so that it will contact the patient at the lumbar curvature, ensuring that the sacrum, torso and shoulders of the patient are in direct contact with the STP pad.



If using a standard pillow for head positioning, ensure that the patient's shoulders are in contact with the STP pad and not the pillow.

ALL STP PADS ARE LATEX FREE. DISCARD AFTER USE.

Rev. 01/17



Instructions for Use STP pads with rails and Integrated Arm Protection

For STP pads with table rail straps Only:

The table rail straps should be on the bottom side of the pad. Slide the straps downward between the table rail and table, bring the end of the straps back up and around the outside of the rail, and affix the strap back upon itself securely:



For STP pads with Integrated Arm Protection:



Wrap the patient's arms in the "wing" portion of the STP pad, and use the draw sheet to secure the arms by running the sheet over the arms and back underneath the patient. Ensure that the arms are fully protected and secured prior to surgery.



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