Gentherm heating canisters will replace Owens and Minor canisters starting 12/16/25. Pads will remain the same.

Old product



The Micro-Temp® LT Localized Heat Therapy System is intended to warm a patient's body part through conductive heat transfer. The conductive heat therapy is provided by circulating warm water through localized temperature therapy pads. The Micro-Temp® LT Unit is composed of a heater, a circulating pump, and a microprocessor. The Micro-Temp® LT is intended for use by appropriately trained healthcare professionals in healthcare facilities and in home care environments.

- 1 Check that the power switch is in the "O" position (unit is off).
- 2 Check the level of sterile water or water that has been passed through a filter less than or equal to 0.22 microns in the reservoir. To do so, twist off the cap of the water fill opening and check if the water is visibly touching the strainer. If needed, carefully add sterile water. Do not use de-ionized water. Do not overfill.

New product



Supplies Needed:

- Micro-Temp®LT unit
- Thermal Pad
- Sterile water or water that has been passed through a filter less than or equal to 0.22 microns.
- 3 Insert the plug into a properly grounded receptacle.
- **4** Lay the localized heat therapy pad flat towards the unit.
- 5 If the pad is already filled, check that there are no leaks. Water leaks present a risk of infection. Leaking pads should never be used.
- 6 Connect the pad to the Micro-Temp® LT unit.

OPERATING THE MICRO-TEMP® LT SYSTEM:

- 1 Turn power switch to the "I" ON position.
- 2 When started up, the Micro-Temp LT unit flashes the 42°C default set point four times and then it will show the actual water temperature.
- Press and hold the "SET" button, then press either the up or down arrow to change the SET temperature display to the desired patient temperature. The display can only be set between 20°C – 42°C. When the desired set temperature is displayed, release the arrow and SET buttons.
- 4 A physician's order is required for the use of the device and setting the temperature of the blanket/ pad.



At least every 20 minutes, or as directed by physician, check patient's temperature and skin condition at area in contact with blanket/pad.

TROUBLE SHOOTING:

ALARM NOTE:

Power Failure: If power is removed from the unit without actuating the power switch (I/O switch), a "Power/Failure Caution" LED flashes and audible indicator sounds. This continues until power is restored to the unit, or until the power switch is turned to the "O" (OFF) position. If power is restored to the unit, the unit will resume previous operation.

ALARM NOTE:

>1°C (2°F): If the set point temperature has been set at least 1°C (2°F) lower than the actual circulating water temperature, the display flashes the actual water temperature, an audible indicator sounds 2 beeps while flashing the red "Power/Failure Caution" LED and the heater shuts off. If the water temperature does not return to set point after 9 minutes, the 2 beep audible indicator will again sound and the red "Power/Failure Caution" LED will again flash. The actual water temperature will continue to flash until the water temperature returns to the set point.

ALARM NOTE:

HL (High Limit): If the circulating water temperature has reached the high temperature limit of 44°C (+5°C or -5°C). when this occurs, the red "Power/Failure Caution" LED illuminates, an audible indicator sounds continuously, and the pump and heater shut off. This indicator condition cancels only after the unit has been powered down and the water temperature has cooled below 42°C. The unit should not be used again until it is serviced.

ALARM NOTE:

Low Water: This indicator condition occurs when the unit is low on water. When this occurs, the yellow "Low Water" LED illuminates and the pump and heater shut off. Once sufficient water level is obtained the unit returns to previous operation.

ALARM NOTE:

Tilt Switch: This indicator condition occurs when the unit has tilted beyond approximately 20° in any direction. When this occurs, an audible indicator sounds, the red "Power Failure/Caution" LED flashes, and the heater and pump shut down. Once the unit returns to an acceptable operating angle, the unit returns to previous operation.



Traversing Wet and Icy Surfaces

Navigating wet and icy surfaces requires some careful consideration to avoid slips and falls. Here are some tips to help you stay safe:

- Wear Appropriate Footwear: Shoes with good traction and non-slip soles can make a big difference. Avoid smooth-soled shoes.
- Take Small Steps: Short, deliberate steps help you maintain better balance and reduce the risk of slipping.
- Walk Slowly: Rushing increases the risk of slipping. Take shorter steps at a slower pace.
- Keep an Eye Out for Changing Surfaces: Be aware of the surface you are walking on and adjust your pace when needed. If possible, walk on cleared paths or areas with gravel or sand.

- Maintain a Wide Stance: Spread your feet apart to increase your balance and lower your center of gravity.
- ☐ Use Handrails: If available, use handrails or other supports to help with balance.
- Avoid Slippery Areas: Look ahead to spot and avoid particularly slippery surfaces/icy patches.
- Be Mindful of Black Ice: Black ice is hard to see but can be extremely slippery. Be extra cautious in shaded areas or early in the morning.
- Use Caution When Entering or Exiting
 Vehicles: The areas around cars can be particularly icy. Take extra care when getting in or out.
 - Practice Falling Safely: If you do slip and fall, try to fall with your body relaxed to reduce the risk of injury. Aim to fall on your side rather than your back or front.

**All accidents and injuries should be reported using Vigilanz. Call Mission WorkWell (828-213-9600) to be seen if medical attention is required as a result of your injury.

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HCA # Healthcare®
Center for Clinical
Advancement
NC Division

Updated: 9/4/24

Central Monitoring Unit (CMU)-Bathroom Process Go-Live 11.17.25

We must ensure that patients continue to receive the appropriate level of monitoring.

- Patients hardwired to in-room monitors (not utilizing a telemetry box), must not be removed from the monitor to go to the bathroom.
- ☐ CMU will begin escalating <u>any</u> loss of visual. The previous 15-minute "bathroom grace period" will no longer be observed.
- What should caregivers do:
 - If a patient needs to use the bathroom, utilize a bedside commode or transition to a tele box with a pulse oximetry cord if needed, consistent with the current monitoring order.

Updated: 11.11.25









Central Monitoring Unit (CMU)-Shower Process

Adhere to the following steps when removing a patient's telemetry for a shower:

Required Action Steps

- Order Required: Caregivers must have a physician order to temporarily remove telemetry for a shower.
- **Monitor Tech Verification:** Monitor Technicians are **required** to verify the existence of the "removal for shower" order when they are notified of the removal.
- Caregiver Supervision: The caregiver must stay with the patient for the entire duration of the shower.
- Reapplication Deadline: Telemetry must be reapplied and functional within 30 minutes of the initial removal.
- Notify CMU: Caregivers must call the CMU immediately upon completion of the shower and reapplication of telemetry to confirm visual monitoring is resumed.

Escalation Procedure

CMU will begin the escalation process if telemetry monitoring has not resumed within 30 minutes of its initial removal.

Updated: 11.11.25



