



# Product Selection Guide

Use this quick checklist to determine correct product category

MOBILITY LEVEL	INCONTINENCE LEVEL	PRODUCT
<p><b>Are you or your loved one:</b></p> <ul style="list-style-type: none"><li>✓ Independent</li><li>✓ Self-toileting</li><li>✓ Do not need assistance in the bathroom</li></ul>	<p><b>Do you or your loved one experience:</b></p> <ul style="list-style-type: none"><li>✓ Light to medium urine loss</li><li>✓ Urine loss while coughing, laughing, sneezing</li><li>✓ Light to medium urine loss after surgery</li></ul>	<b>PADS</b>
<p><b>Are you or your loved one:</b></p> <ul style="list-style-type: none"><li>✓ Independent</li><li>✓ Self-toileting</li><li>✓ Do not need assistance in the bathroom</li></ul>	<p><b>Do you or your loved one experience:</b></p> <ul style="list-style-type: none"><li>✓ Moderate to heavy urine leakage</li><li>✓ Occasional / once-in-a-while light bowel streaking</li></ul>	<b>PROTECTIVE UNDERWEAR</b>
<p><b>Are you or your loved one:</b></p> <ul style="list-style-type: none"><li>✓ More dependent on loved ones for care</li><li>✓ Needing assistance toileting</li><li>✓ Needing assistance in the bathroom</li><li>✓ Having mental confusion at times or all the time</li></ul>	<p><b>Do you or your loved one experience:</b></p> <ul style="list-style-type: none"><li>✓ Urine loss of moderate to heavy amounts</li><li>✓ Bowel control loss</li></ul>	<b>BRIEFS</b>