



| For PI risk Series | LOW | LOW-MEDIUM | MEDIUM | MEDIUM-HIGH | MEDIUM-HIGH |
|---------------------------------|---|---|---|---|---|
| Products Name | Domus 1 | Domus 2s | Domus 3 | Domus 4 | Domus Auto |
| |  |  |  |  |  |
| Setting | Home | Home | Home & LTC | Home & LTC | Home & LTC |
| Overlay / Replacement | Overlay | Overlay | Replacement | Replacement | Replacement |
| Fit For | Twin / Full | Twin / Full | Twin/ Hospital bed | Twin/ Hospital bed | Twin/ Hospital bed |
| Head Pillow function | x | x | x | x | x |
| Heel relief | x | x | x | x | x |
| HCPCS Code | E0181 | E0372 | E0277 | E0277 | E0277 |
| Max. Weight Capacity | 220 lb | 260 lb | 440 lb | 450 lb | 450 lb |
| PUMP | Compressor | Compressor | Compressor | Compressor | Compressor |
| System Control | Analog | Analog | Analog | Digital | Digital |
| Alternating Pressure | x | x | • | • | • |
| Low Air Loss | x | x | • | • | • |
| Pulsation | x | x | x | x | x |
| Lateral Rotation | x | x | x | x | x |
| Self-Adjusting | x | x | x | x | • |
| Max Firm | x | x | x | • | • |
| Static Mode | x | x | • | • | • |
| Seat Inflation | x | x | x | • | • |
| Cell-On-Cell Safety Base | x | x | x | • | • |
| Raised Side Rails (Air) | x | x | x | x | x |
| Compressor flow (lpm) | 4 | 4 | 8 | 8 | 8 |
| Pump Pressure (mmHg) | 30-80 | 30-80 | 30-80 | H8" : 15-40 | 20-40 |
| Cycle time | 10 min | 10 min | 8 (120V) | 10 | 10 |
| Warranty | 1 year | 1 year | 1 year | 2 years | 2 years |
| MATTRESS | | | | | |
| Top Cover material | X | X | Nylon/PU (quilted) | Nylon/PU (quilted) | Nylon/PU (quilted) |
| Cell Structure | One-Piece Bubble Pad | One-Piece Pad | 5" Single Chamber Cell 8": False Cell-on-cell | H8" : Cell-on-cell | H8" : Cell-on-cell |
| Underside layer | X | X | X | x | x |
| CPR | X | X | • (Strap) | • (Knob) | • (Strap) |
| Quick Connector | X | X | • | • | • |
| Transport function | X | X | • (≈ 30 min) | • (8 hrs) | • (8 hours) |
| Mattress Width | 35.4" | 33" | 35.4" | 35.4" | 35.4" |
| Mattress Height | 2.5" | 5" / 4.5" / 3.5" | 5" / 8" | 8" | 8" |
| Warranty | 6 months | 6 months | 18 months | 2 years | 2 years |
| NOTE | | | | | |

| For PI risk Series | High | High | High | High | High |
|---------------------------------|---|---|---|---|---|
| Products Name | Optima Turn | Optima Auto | Optima Prone | ProCare Elite | Serene Air |
| |  |  |  |  |  |
| Setting | Home & LTC & Hospital | LTC & Hospital | LTC & Hospital | Home & LTC & Hospital | Home & LTC & Hospital |
| Overlay / Replacement | Replacement | Replacement | Replacement | Replacement | Replacement |
| Fit For | Twin/ Hospital bed | Twin/ Hospital bed | Twin/ Hospital bed | Twin/ Hospital bed | Twin/ Hospital bed |
| Head Pillow function | • | • | • | • | x |
| Heel relief | • | • | • | • | x |
| HCPCS Code | E0277 | E0277 | E0277 | E0277 | E0277 |
| Max. Weight Capacity | 397 lb | 550 lb | 550 lb | 440 / 1000 lb | 440 / 700 / 900 |
| PUMP | Compressor | Compressor | Compressor | Compressor | Blower |
| System Control | Digital | Digital | Digital | Digital | Digital |
| Alternating Pressure | • | • | • | • | • |
| Low Air Loss | • | • | • | • | • |
| Pulsation | x | x | x | x | • |
| Lateral Rotation | • | x | x | x | x |
| Self-Adjusting | x | • | • | • | x |
| Max Firm | • | • | • | • | • |
| Static Mode | • | • | • | • | • |
| Seat Inflation | • | • | • | • | • |
| Cell-On-Cell Safety Base | x | • | x | • | x |
| Raised Side Rails (Air) | • | x | x | • (Optional) | x |
| Compressor flow (lpm) | > 9.5 lpm | > 9.5 lpm | > 9.5 lpm | > 9.5 lpm | > 1300 lpm |
| Pump Pressure (mmHg) | 20-80 | 10-40 | | 15-40 | 14-30 |
| Cycle time | 10 / 15 / 20 / 25 min | 10 / 15 / 20 / 25 min | 10 / 15 / 20 / 25 min | 10 / 15 / 20 / 25 min | 5/10/15/20 min |
| Warranty | 2 years | 2 years | 2 years | 2 years | 2 years |
| MATTRESS | | | | | |
| Top Cover material | Stretch | Stretch | Stretch | Stretch | Stretch |
| Cell Structure | Oval (1-3 & 13-20) Rectangular (4-12) | Rectangular cell 6 cell-on-cells (10-15) | X | 20 Cell-on-cell | H8" : Single Cell |
| Underside layer | X | X | X | X | 2" Foam |
| CPR | • (Knob) | • (Knob) | • (Knob) | • (Knob) | • (Knob) |
| Quick Connector | • | • | • | • | • |
| Transport function | • (24 hours) | • (24 hours) | • (24 hours) | • (8 hours) | X |
| Mattress Width | 36" | 36" | 36" | 36" /42" / 48" | 36" /42" / 48" |
| Mattress Height | 8" | 8" | 8" | 8" | 10" (8"+2" Foam) |
| Warranty | 2 years | 2 years | 2 years | 2 years | 2 years |
| NOTE | | Cell-in-Cell | | | |