



Healthy Skin. Positive Outcomes.

This is our quest. Keeping peristomal skin healthy. The way it was meant to be.

Hollister Ostomy Care is dedicated to delivering products that provide an optimum fit to prevent leakage, along with the best skin interface formulations to protect and maintain healthy skin.

We believe every unique person with a stoma deserves a customized solution, and the positive outcomes that can result. Our products and services are designed to do just that.

Thank you for partnering with us on our journey.

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For a complete list of Hollister products, refer to the comprehensive Hollister product catalog online at www.hollister.com.

## General Information

## **HCPCS Codes Disclaimer**

The reimbursement information provided herein is intended to provide general information concerning coding of Hollister products only. Hollister does not guarantee coverage or payment for any products. The ultimate responsibility for proper coding, satisfying reimbursement requirements, and obtaining reimbursement remains with the provider. Coding and coverage policies and guidelines are complex, can vary from one carrier or region to another, and are updated frequently. Providers should check with their local carriers or intermediaries often and should consult with counsel, a reimbursement specialist, and/or the DMECS website for any coding, coverage, reimbursement, or billing questions.

HCPCS codes shown in this Product Catalog are current as of January 2018.

## General Medicare Product Maximum Allowables of Selected Ostomy Products

Two-Piece Pouching Systems	Maximum Quantity per Mo	nth
Flat, Standard Wear Skin Barriers with Floating	Flanges	20
Drainable Pouches		20
Closed Pouches		60
Urostomy Pouches		20
Irrigator Sleeves		4

One-Piece Pouching Systems	Maximum Quanti	ity per Month
Drainable Pouches with Flat, Standard Wear S	kin Barriers	20
Closed Pouches with Flat, Standard Wear Skir	Barriers	60
Stoma Caps		31

Pediatric Pouching Systems	Maximum Quantity per Month
One-Piece Drainable and Urostomy Pouches	20
Two-Piece Skin Barriers	20
Two-Piece Drainable and Urostomy Pouches	20
Two-Piece Mini Closed Pouches	60
Pediatric Ostomy Belt	1

Accessories	Maximum Quantity per Month
Skin Barrier Rings	*
Skin Barrier Paste	4 oz
Stoma Powder	10 oz/6 months
Lubricating Deodorant	*
Ostomy Belt	1
Skin Protective Wipes	150/6 months

Note: Medicare allows a usual maximum quantity of supplies each month. The table above provides the maximum allowable amounts. The amount of supplies you need may vary from the maximum quantities. That will be determined by your physician and must be on your order and in your medical record. If you require more ostomy supplies than what is listed in the table, your physician will need to provide a medical justification for the additional supplies. The ostomy supplier will need to have that medical justification on file when billing the Medicare program for the additional supplies.

<sup>\*</sup> No usual maximum amount established.

## General Information

## Reimbursement For Fistula Management by Medicare

Reimbursement for fistula management under the Medicare program is described in the Surgical Dressings Policy Article. Specifically the article states:

"Surgical dressings are covered when either of the following criteria are met:

- They are required for the treatment of a wound caused by, or treated by, a surgical procedure; or
- 2. They are required after debridement of a wound."

The article goes on to explain:

"Examples of situations in which dressings are noncovered under the Surgical Dressings benefit are:

 a. Drainage from a cutaneous fistula which has not been caused by or treated by a surgical procedure"

For information see The Fistula Management Care Tip on www.hollister.com

#### **Latex Statement**

All Hollister Ostomy Care products found in this catalog and its packaging does not include natural rubber latex as a component, and our component suppliers do not add natural rubber as part of their production process.

## Medicare Utilization Chart

## Medicare's Usual Maximum Quantity for Ostomy Supplies

The quantity of ostomy supplies needed by a patient is determined primarily by the type of ostomy, its location, its construction, and the condition of the skin surface surrounding the stoma. There will be variation according to individual patient need and their needs may vary over time. The table below lists the maximum number of items/units of service that are usually medically necessary. The actual quantity needed for a particular patient may be more or less than the amount listed depending on the factors that affect the frequency of barrier and pouch change. The medical necessity for use of a greater quantity of supplies than the amounts listed must be clearly documented in the patient's medical record, and must be available upon request. If adequate documentation is not provided when requested, the excess quantities will be denied as not medically necessary.

## Per Medicare LCD for Ostomy Supplies (L33828), effective 1-1-2017.

HCPCS	Long Description Maximu	m Quantity
A4331	Extension drainage tubing, any type, any length, with connector/adapter, for use with urinary leg bag or urostomy pouch, each	*
A4357	Bedside drainage bag, day or night, with or without anti-reflux device, with or without tube, each	2 ea /mo
A4361	Ostomy faceplate, each	3 ea/6 mo
A4362	Skin barrier, solid, 4 x 4 or equivalent, each	20 ea/mo
A4363	Ostomy clamp, any type, replacement only, each	*
A4364	Adhesive, liquid or equal, any type, per ounce	4 oz/mo
A4366	Ostomy vent, any type, each	*
A4367	Ostomy belt, each	1 ea/mo
A4368	Ostomy filter, any type, each	*
A4369	Ostomy skin barrier, liquid (spray, brush, etc.), per ounce	2 oz/mo
A4371	Ostomy skin barrier, powder, per ounce	10 oz/6 mo
A4372	Ostomy skin barrier, solid 4 x 4 or equivalent, standard wear with built-in convexity, each	*
A4373	Ostomy skin barrier, with flange (solid, flexible, or accordion), with built-in convexity, any size, each	*
A4375	Ostomy pouch, drainable, with faceplate attached, plastic, each	) *
A4376	Ostomy pouch, drainable, with faceplate attached, rubber, each	*
A4377	Ostomy pouch drainable for use on faceplate, plastic, each	10 ea/mo
A4378	Ostomy pouch, drainable, for use on faceplate, rubber, each	*
A4379	Ostomy pouch, urinary, with faceplate attached, plastic, each	*
A4380	Ostomy pouch, urinary, with faceplate attached, rubber, each	*
A4381	Ostomy pouch, urinary, for use with faceplate, plastic, each	10 ea/mo
A4382	Ostomy pouch, urinary, for use on faceplate, heavy plastic, each	*
A4383	Ostomy pouch, urinary, for use on faceplate, rubber, each	*
A4384	Ostomy faceplate equivalent, silicone ring, each	*
A4385	Ostomy skin barrier, solid 4 x 4 or equivalent, extended wear, without built-in convexity, each	*
A4387	Ostomy pouch, closed, with barrier attached, with built-in convexity (one-piece), each	*
A4388	Ostomy pouch, drainable, with extended wear barrier attached, (one-piece), each	*
A4389	Ostomy pouch, drainable, with barrier attached, with built-in convexity (one-piece), each	*

<sup>\*</sup>No established usual maximum, refer to Medicare Utilization Guidelines.

HCPCS	Long Description	Quantity
A4390	Ostomy pouch, drainable, with extended wear barrier attached, with built-in convexity (one-piece), each	*
A4391	Ostomy pouch, urinary, with extended wear barrier attached (one-piece), each	*
A4392	Ostomy pouch, urinary, with standard wear barrier attached, with built-in convexity (one-piece), each	*
A4393	Ostomy pouch, urinary, with extended wear barrier attached, with built-in convexity (one-piece), each	*
A4394	Ostomy deodorant, with or without lubricant, for use in ostomy pouch, liquid, per fluid ounce	*
A4395	Ostomy deodorant for use in ostomy pouch, solid, per tablet	*
A4396	Ostomy belt with peristomal hernia support	*
A4397	Irrigation supply, sleeve, each	4 ea/mo
A4398	Ostomy irrigation supply, bag, each	2 ea/6 mo
A4399	Ostomy irrigation supply, cone/catheter, with or without brush	2 ea/6 mo
A4402	Lubricant, per ounce	4 oz/mo
A4404	Ostomy ring, each	10 ea/mo
A4405	Ostomy skin barrier, non-pectin based, paste, per ounce	4 oz/mo
		4 oz/mo
A4406 A4407	Ostomy skin barrier, pectin-based, paste, per ounce Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, with built-in convexity, 4 x 4 inches or smaller, each	*
A4408	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, with built-in convexity, larger than 4 x 4 inches, each	*
A4409	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, without built-in convexity, 4 x 4 inches or smaller, each	*
A4410	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, without built-in convexity, larger than 4 x 4 inches, each	*
A4411	Ostomy skin barrier, solid 4 x 4 or equivalent, extended wear, with built-in convexity, each	*
A4412	Ostomy pouch, drainable, high output, for use on a barrier with flange (two-piece system), without filter, each	*
A4413	Ostomy pouch, drainable, high output, for use on a barrier with flange (two-piece system), with filter, each	*
A4414	Ostomy skin barrier, with flange (solid, flexible, or accordion), without built-in convexity, 4 x 4 inches or smaller, each	20 ea/mo
A4415	Ostomy skin barrier, with flange (solid, flexible, or accordion), without built-in convexity, larger than 4 x 4 inches, each	20 ea/mo
A4416	Ostomy pouch, closed, with barrier attached, with filter (one-piece), each	60 ea/mo
A4417	Ostomy pouch, closed, with barrier attached, with built-in convexity, with filter (one-piece), each	60 ea/mo
A4418	Ostomy pouch, closed, without barrier attached, with filter (one-piece), each	60 ea/mo
A4419	Ostomy pouch, closed, for use on barrier with non-locking flange, with filter (two-piece), each	60 ea/mo
A4420	Ostomy pouch, closed, for use on barrier with locking flange (two-piece), each	60 ea/mo
A4421	Ostomy supply; miscellaneous	*
A4422	Ostomy absorbent material (sheet/pad/crystal packet) for use in ostomy pouch to thicken liquid stomal output, each	*
A4422	for use in ostomy pouch to thicken liquid stomal	

<sup>\*</sup>No established usual maximum, refer to Medicare Utilization Guidelines.

## Medicare Utilization Chart

HCPCS	Long Description	Quantity
		60 ea/mo
A4423	Ostomy pouch, closed, for use on barrier with locking flange, with filter (two-piece), each	
A4424	Ostomy pouch, drainable, with barrier attached, with filter (one-piece), each	r 20 ea/mo
A4425	Ostomy pouch, drainable, for use on barrier with non-locking flange, with filter (two-piece system), each	20 ea/mo
A4426	Ostomy pouch, drainable, for use on barrier with locking flange (two-piece system), each	20 ea/mo
A4427	Ostomy pouch, drainable, for use on barrier with locking flange, with filter (two-piece system) each	20 ea/mo
A4428	Ostomy pouch, urinary, with extended wear barrier attached, with faucet-type tap with valve (one-piece), ea	*
A4429	Ostomy pouch, urinary, with barrier attached, with built-ir convexity, with faucet-type tap with valve (one-piece), ea	n 20 ea/mo
A4430	Ostomy pouch, urinary, with extended wear barrier attached, with built-in convexity, with faucet-type tap with valve (one-piece), each	*
A4431	Ostomy pouch, urinary, with barrier attached, with faucet-type tap, with valve (one-piece), each	20 ea/mo
A4432	Ostomy pouch, urinary, for use on barrier with non-locking flange, with faucet-type tap with valve (two-piece), each	20 ea/mo
A4433	Ostomy pouch, urinary, for use on barrier with locking flange (two-piece), each	20 ea/mo
A4434	Ostomy pouch, urinary, for use on barrier with locking flange, with faucet-type tap with valve (two-piece), each	20 ea/mo
A4435	Ostomy pouch, drainable, high output, with extended wear barrier (one-piece system), with or without filter, ea	* ach
A4450	Tape, non-waterproof, per 18 square inches 40	ea (18 sq in)/mo
A4452		ea (18 sq in)/mo
A4455	Adhesive remover or solvent (for tape, cement, or other adhesive), per ounce	16 oz/6 mo
A4456	Adhesive remover, wipes, any type, each	*
A5051	Ostomy pouch, closed, with barrier attached (one-piece), each	60 ea/mo
A5052	Ostomy pouch, closed, without barrier attached, (one-piece), each	60 ea/mo
A5053	Ostomy pouch, closed, for use on faceplate, each	60 ea/mo
A5054	Ostomy pouch, closed, for use on barrier with flange (two-piece), each	60 ea/mo
A5055	Stoma Cap	31 ea/mo
A5056	Ostomy pouch, drainable, with extended wear barrier attached, with filter, (one-piece), each	40 ea/mo
A5057	Ostomy pouch, drainable, with extended wear barrier	40 ea/mo
	attached, with built-in convexity, with filter, (one-piece).	each
A5061	attached, with built-in convexity, with filter, (one-piece), $\epsilon$ Ostomy pouch, drainable, with barrier attached (one-piece), each	each 20 ea/mo
A5061 A5062	Ostomy pouch, drainable, with barrier attached	
	Ostomy pouch, drainable, with barrier attached (one-piece), each Ostomy pouch, drainable, without barrier attached	20 ea/mo
A5062	Ostomy pouch, drainable, with barrier attached (one-piece), each Ostomy pouch, drainable, without barrier attached (one-piece), each Ostomy pouch, drainable, for use on barrier with flange	20 ea/mo 20 ea/mo
A5062 A5063	Ostomy pouch, drainable, with barrier attached (one-piece), each Ostomy pouch, drainable, without barrier attached (one-piece), each Ostomy pouch, drainable, for use on barrier with flange (two-piece system), each Ostomy pouch, urinary, with barrier attached	20 ea/mo 20 ea/mo 20 ea/mo
A5062 A5063 A5071	Ostomy pouch, drainable, with barrier attached (one-piece), each Ostomy pouch, drainable, without barrier attached (one-piece), each Ostomy pouch, drainable, for use on barrier with flange (two-piece system), each Ostomy pouch, urinary, with barrier attached (one-piece), each Ostomy pouch, urinary, without barrier attached	20 ea/mo 20 ea/mo 20 ea/mo 20 ea/mo

<sup>\*</sup>No established usual maximum, refer to Medicare Utilization Guidelines.

HCPCS	Long Description	Quantity
A5081	Continent device, plug for continent stoma	31 ea/mo
A5082	Continent device, catheter for continent stoma	1 ea/mo
A5083	Continent device, stoma absorptive cover for continent stor	na 150 ea/mo
A5093	Ostomy accessory, convex insert	10 ea/mo
A5102	Bedside drainage bottle with or without tubing, rigid or expandable, each	2 ea/6 mo
A5120	Skin barrier, wipes or swabs, each	150 ea/6 mo
A5121	Skin barrier, solid, 6 x 6 or equivalent, each	20 ea/mo
A5122	Skin barrier, solid, 8 x 8 or equivalent, each	20 ea/mo
A5126	Adhesive or non-adhesive, disk or foam pad	20 ea/mo
A5131	Appliance cleaner, incontinence and ostomy appliances, per 16 ounce	ea (16 oz btl)/mo
A6154	Wound pouch, each	3/wk
A6209	Foam dressing, wound cover, sterile, pad size, 16 sq in or less, without adhesive boarder, each dressing	3/wk
A6216	Gauze, non-impregnated, non sterile, pad size 16 sq in or less, without adhesive border, each dressing	60 ea/mo
A9270	Non-covered item or service	*

<sup>\*</sup>No established usual maximum, refer to Medicare Utilization Guidelines.



DID YOU KNOW...

## How to Size Hollister Ostomy Barriers

A properly-fitted pouching system is essential to minimize stomal and skin irritation, and to obtain optimum pouch wear time. A stoma measuring guide allows correct measurement of the stoma. Measure the stoma before every barrier application. Select the barrier opening which fits where the skin and stoma meet. Verify that no skin is showing between the skin barrier and the stoma. Too large of an opening will leave skin exposed and could lead to skin irritation or erosion.

## How to Use The Hollister Product Catalog

Hollister has created this simplified catalog to help our customers find what they need in a quick and efficient manner.

#### If you...

## know the stock number (or stock series number)

Go to the numeric index at the back of the catalog on pages 86-87 to find the page number where it appears.

#### If you...

## know the product brand or series name

Go to the Table of Contents on pages 2-3 to find the page number where it appears or reference the Product Name Index on pages 88-89.

## If you...

## know the HCPCS code

Go to the HCPCS Code Index at the back of the catalog on page 90.

## **Hollister Secure Start Services**

## Personalized Patient Support



## **Support Throughout the Continuum of Care**

We are proud to offer dedicated support for each and every patient we serve along the continuum of care. Hollister Secure Start services provide a lifetime of personalized support for our members.

Our team is focused on helping patients with:

- Finding the right product fit
- Navigating insurance coverage
- Identifying supplier options
- Providing condition specific education
- And more!

To learn more, call us at **1.888.808.7456**.



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## Choosing the Right Skin Barrier

## Choosing the Right Skin Barrier Makes All the Difference

- No single skin barrier works for everyone
- Matching individual needs is at the core of skin barrier selection
  - Skin type: healthy, normal, thin, fragile, sensitive, dry, flaky, oily, sweaty
  - Type of stomal output: semi-formed/formed stool, liquid stool, urine
  - Change frequency

## Types of Skin Barriers and Their Performance

## CeraPlus extended wear skin barrier

- Contains all skin barrier characteristics (adhesion, absorption and erosion resistance) and is infused with ceramide – a naturally occurring lipid in the skin which protects against dryness
- Its formulation is designed to help protect the skin's natural moisture barrier and help maintain good peristomal skin health

#### Flextend extended wear skin barrier

- Durable with high resistance to erosion
- Swells when it comes in contact with liquid to help form a seal between the skin and the stoma
- High initial tack and suitable for those who perspire heavily
- · Strong adhesion and flexibility

#### FormaFlex extended wear skin barrier

- Helps to provide a secure peristomal skin seal as it will maintain its shape after being stretched or shaped
- Provides an easy-to-customize opening due to barrier material
- Easy to shape to individual stomas without the use of scissors

#### FlexWear standard wear skin barrier

- Good balance of durability and gentleness providing moderate adhesion, and can handle frequent or infrequent pouch changes
- Resistant to fluid erosion and tends to hold its shape in the presence of fluids
- Suitable for all skin types, depending on change frequency
- Designed to be worn more than one day

## SoftFlex standard wear skin barrier

- Appropriate choice for:
  - Those who have thin, fragile, or sensitive skin (such as those who have undergone chemo/radiation therapy)
  - People who desire frequent removal
- Offers low erosion resistance
- Designed to limit skin damage as its gentle to the skin, which allows for frequent pouch changes
- Thin and flexible without compromising security

## Karaya 5 standard wear skin barrier

- Well-suited for sensitive skin or in some cases where allergic reactions to synthetic barriers has occurred
- Mildly adhesive needs a belt to secure pouching system



# **Ceramide Products**



# Available on **Premier** One-Piece and **New Image** Two-Piece Pouching Systems

## The CeraPlus Skin Barrier with Remois Technology\*

At Hollister, we realize the importance of healthy peristomal skin. Our newest skin barrier is infused with ceramide, the skin's naturally occurring protection against dryness. The CeraPlus skin barrier is designed to help protect the skin's own moisture barrier, and is available on Premier one-piece and New Image two-piece pouching systems. This means you can enjoy the same pouch and skin barrier features from Hollister that you've come to rely on—and more!

The CeraPlus skin barrier from Hollister Ostomy Care—because peristomal skin deserves better.



\*Remois is a technology of Alcare Co., Ltd.



**Ceramide** is a natural component of human skin, consisting of waxy lipid molecules. Ceramide links cells of the outer skin (epidermis) together to form a waterproof, protective barrier. Ceramides help prevent water loss that can lead to skin damage and dryness.

All stock numbers shaded in gray throughout this catalog denote ceramide infused products.

## New Image Two-Piece Pouching System

## **Color Matching System**

To help you select compatible *New Image* pouching system components, every box label is color-coded. First, select the proper skin barrier; then select a matching color-coded pouch ("red" skin barrier box label is compatible to "red" pouch box label).



#### **CeraPlus** Flat Skin Barriers with Integrated Floating Flange

ociarius riai skiii barriers with integrated ribating riange			
00	1120x (CUT-TO-FIT)  • CeraPlus (extended wear) Skin Barrier  • With Tape Border		
	HCPCS: A4409		
Stock No	Flange Size	For Stomas Up To	
11202 11203 11204	1-3/4" (44 mm) 2-1/4" (57 mm) 2-3/4" (70 mm)	1-1/4" (32 mm) 1-3/4" (44 mm) 2-1/4" (57 mm)	

	<b>1510x</b> (CUT-TO-FIT) ► CeraPlus (extended wear) Skin Barrier ► Without Tape Border	Box of 5
	HCPCS for 15102, 15103: A4409 HCPCS for 15104: A4410	
Stock No	Flange Size	For Stomas Up To
15102 15103 15104	1-3/4" (44 mm) 2-1/4" (57 mm) 2-3/4" (70 mm)	1-1/4" (32 mm) 1-3/4" (44 mm) 2-1/4" (57 mm)

#### **CeraPlus** Convex Skin Barriers with Integrated Floating Flange

ociar ius o	nivex 3kiii bairiei3 willi liilegiai	led i loating i lange
00	1140x (CUT-T0-FIT) ► CeraPlus (extended wear) Skin B ► With Tape Border	Box of 5 convex
	HCPCS: A4407	
Stock No	Flange Size	For Stomas Up To
11402 11403 11404	1-3/4" (44 mm) 2-1/4" (57 mm) 2-3/4" (70 mm)	1" (25 mm) 1-1/2" (38 mm) 2" (51 mm)

# **CeraPlus** Convex Skin Barriers with Integrated Floating Flange (continued)





CeraPlus (extended wear) Skin Barrier

Without Tape Border



HCPCS for 15302, 15303: A4407 HCPCS for 15304: A4408

HUPUS 101 10304; A4406	
Flange Size	For Stomas Up To
1-3/4" (44 mm) 2-1/4" (57 mm) 2-3/4" (70 mm)	1" (25 mm) 1-1/2" (38 mm) 2" (51 mm)
	Flange Size 1-3/4" (44 mm) 2-1/4" (57 mm)







► CeraPlus (extended wear) Skin Barrier

► With Tape Border



Box of 10

Box of 10

CONVEX

|--|

Stock No	Flange Size	Barrier Opening
11503	1-3/4" (44 mm)	7/8" (22 mm)
11504	1-3/4" (44 mm)	1" (25 mm)
11505	2-1/4" (57 mm)	1-1/8" (29 mm)
11506	2-1/4" (57 mm)	1-1/4" (32 mm)

## **Premier** One-Piece Pouching System

### Drainable Pouches with CeraPlus Flat Barriers



#### 8931 (CUT-TO-FIT)

- ► Drainable Pouch
- CeraPlus (extended wear) Skin Barrer
- With Tape Border
- ► Without Integrated *AF300* Filter
- Lock 'n Roll Microseal Closure
- ► With ComfortWear Panels Body Side Only

**HCPCS: A4388** 

Ultra-Clear Stock No	For Stomas Up To	Pouch Length	
8931	2-1/2" (64 mm)	12" (30 cm)	



#### 8901 (CUT-TO-FIT)

- ► Drainable Pouch
- ► CeraPlus (extended wear) Skin Barrer
- With Tape Border
- ► With Integrated *AF300* Filter
- ► Lock 'n Roll Microseal Closure
- ► With ComfortWear Panels Both Sides

HCPCS: A5056

 
 Beige w/Viewing Option Stock No
 For Stomas Up To
 Pouch Length

 8901
 2-1/2" (64 mm)
 12" (30 cm)

For a complete list of Hollister products, refer to the comprehensive Hollister product catalog online at www.hollister.com.

## Drainable Pouches with CeraPlus Flat Barriers (continued)



#### 89xx (PRE-SIZED)

- Drainable Pouch
- ► CeraPlus (extended wear) Skin Barrer

Box of 10

Box of 5

Box of 5

CONVEX

SOFT

- ► With Tape Border
- ► With Integrated AF300 Filter
- ► Lock 'n Roll Microseal Closure
- With ComfortWear Panels Both Sides

#### HCPCS: A5056

Beige w/Viewing Option Stock No	Barrier Opening	Pouch Length
8925	1" (25 mm)	12" (30 cm)
8930	1-3/16" (30 mm)	12" (30 cm)
8935	1-3/8" (35 mm)	12" (30 cm)
8940	1-9/16" (40 mm)	12" (30 cm)

## Drainable Pouches with CeraPlus Soft Convex Barriers



#### 895xx (CUT-TO-FIT)

- ► Drainable Pouch
- ► Soft Convex
- ► CeraPlus (extended wear) Skin Barrier
- With Tape Border
- ► With Integrated *AF300* Filter
- ► Lock 'n Roll Microseal Closure
- With Belt Tabs
- ► With ComfortWear Panels Both Sides

#### HCPCS Code: A5057

Beige w/Viewing Option Stock No	For Stomas Up To	Pouch Length
8954	1" (25 mm)	12" (30 cm)
8958	1-1/2" (38 mm)	12" (30 cm)
89511	2-1/8" (55 mm)	12" (30 cm)



## 896x (PRE-SIZED)

- ▶ Drainable Pouch
- ▶ Soft Convex
- ► CeraPlus (extended wear) Skin Barrier
- With Tape Border
- ► With Integrated *AF300* Filter
- Lock 'n Roll Microseal Closure
- With Belt Tabs
- ► With ComfortWear Panels Both Sides

## **HCPCS: A5057**

Stock No	Barrier Opening	Pouch Length
8960	3/4" (19 mm)	12" (30 cm)
8961	7/8" (22 mm)	12" (30 cm)
8962	1" (25 mm)	12" (30 cm)
8963	1-1/8" (29 mm)	12" (30 cm)

#### Drainable Pouches with CeraPlus Convex Barriers



Beige w/Viewing Option

#### 891xx (CUT-TO-FIT)

► Drainable Pouch

CeraPlus (extended wear) Skin Barrier



CONVEX

- With Tape Border
- ► With Integrated AF300 Filter
- Lock 'n Roll Microseal Closure
- With Belt Tabs
- With ComfortWear Panels Both Sides

For Stomas Up To

1" (25 mm) 1-1/2" (38 mm)

2" (51 mm)

## HCPCS Code: A5057



Stock No

8914 8918

89111

## 898xx (CUT-TO-FIT)

► Drainable Pouch

- ► CeraPlus (extended wear) Skin Barrier
- With Tape Border
- Without Integrated AF300 Filter
  - Lock 'n Roll Microseal Closure
  - With Belt Tabs
- With ComfortWear Panels Body Side Only

#### HCPCS Code: A4390



**Ultra-Clear** Stock No

8984

8988

89811

## 899x (PRE-SIZED)

- Drainable Pouch
- CeraPlus (extended wear) Skin Barrier

For Stomas Up To

1" (25 mm) 1-1/2" (38 mm)

2" (51 mm)

- With Tape Border
- With Integrated AF300 Filter
- ► Lock 'n Roll Microseal Closure
- With Belt Tabs
- With ComfortWear Panels Both Sides

#### HCPCS: A5057

Beige w/Viewing Option Stock No	Barrier Opening	Pouch Length
8990	3/4" (19 mm)	12" (30 cm)
8991	7/8" (22 mm)	12" (30 cm)
8992	1" (25 mm)	12" (30 cm)
8993	1-1/8" (29 mm)	12" (30 cm)

# Box of 5

**Pouch Length** 

12" (30 cm) 12" (30 cm)

12" (30 cm)

Box of 5

**Pouch Length** 

12" (30 cm) 12" (30 cm)

12" (30 cm)

Box of 5

CONVEX

## Urostomy Pouches with CeraPlus Soft Convex Barriers

## Upgraded Design



#### **8413xx** (CUT-TO-FIT)

Urostomy Pouch

## Box of 5 includes 1 adapter

► Anti-Reflux Valve CeraPlus (extended wear) Skin Barrier

S0FT CONVEX

NEW

- With Tape Border
  - With Belt Tabs
  - ► With ComfortWear Panels Body Side Only

## **Upgraded Design Features:**

- ► Multi-Chamber Design
- Softer, Streamlined Tap
- ► Drain Valve Indicator

#### HCPCS: A4430

Ultra Clear Stock No	For Stomas Up To	Pouch Length
84134	1" (25 mm)	9" (23 cm)
84138	1-1/2" (38 mm)	9" (23 cm)
841311	2 1/8" (55 mm)	9" (23 cm)

## Upgraded Design



#### 841x (PRE-SIZED)

Urostomy Pouch

includes 1 adapter

- ► Anti-Reflux Valve
- CeraPlus (extended wear) Skin Barrier With Tape Border
- **CONVEX** NEW

Box of 5

- With Belt Tabs
- With ComfortWear Panels Body Side Only

## **Upgraded Design Features:**

- ► Multi-Chamber Design
- Softer, Streamlined Tap
- Drain Valve Indicator

## HCPCS: A4430

Beige w/Viewing Option Stock No	Barrier Opening	Pouch Length
8412	3/4" (19 mm)	9" (23 cm)
8413	1/8" (22 mm)	9" (23 cm)
8414	1" (25 mm)	9" (23 cm)
8415	1-1/8" (29 mm)	9" (23 cm)

## Non Sterile Kits — Drainable



## 1960x

Colostomy/Ileostomy Kit includes:

- ► (1) 1120x CeraPlus (extended wear) Skin Barrier with Tape Border
- ► (1) 1800x (Lock 'n Roll Microseal Closure) Ultra-Clear

Box of 5

Box of 5

- ► Single-Use Package
- ► With ComfortWear Panels

#### HCPCS: A5063 + A4414

Ultra-Clear Stock No	Flange Size	For Stomas Up To
19602	1-3/4" (44 mm)	1-1/4" (32 mm)
19603	2-1/4" (57 mm)	1-3/4" (44 mm)
19604	2-3/4" (70 mm)	2-1/4" (57 mm)



#### 1980x

Box of 5

Colostomy/lleostomy Kit includes:

- ► (1) 1120x CeraPlus (extended wear) Skin Barrier with Tape Border
- ► (1) 1817x (Clamp Closure) Ultra-Clear
- ► Single-Use Package
- ► With ComfortWear Panels

#### HCPCS: A5063 + A4414

Ultra-Clear Stock No	Flange Size	For Stomas Up To
19802	1-3/4" (44 mm)	1-1/4" (32 mm)
19803	2-1/4" (57 mm)	1-3/4" (44 mm)
19804	2-3/4" (70 mm)	2-1/4" (57 mm)

## Non Sterile Kits — Urostomy



#### 1990x

Urostomy Kit includes:

► (1) 1120x CeraPlus (extended wear)

- Skin Barrier with Tape Border ► (1) 1892x with *ComfortWear* Panels (Ultra-Clear Pouch Film)
- ► (1) 7331 Urostomy Drain Tube Adapter
- ► Single-Use Package

#### HCPCS: A4432 + A4409

Ultra-Clear Stock No	Flange Size	For Stomas Up To
19902	1-3/4" (44 mm)	1-1/4" (32 mm)
19903	2-1/4" (57 mm)	1-3/4" (44 mm)
19904	2-3/4" (70 mm)	2-1/4" (57 mm)