

2 DO NOT RE-USE STERILE R

Endotracheal

Contents:

1 Day Sticker

DO NOT USE IF PACKAGE IS

Rx

Only

NOT MADE WITH

DEHP

NOT MADE WITH

NATURAL RUBBER LATEX

1 Closed Suction Catheter

1 15mm × 22mm Flex Adapter

CONSULT INSTRUCTIONS FOR USE

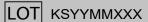
Closed Suction System

Double Swivel Elbow Adult (72 Hour)

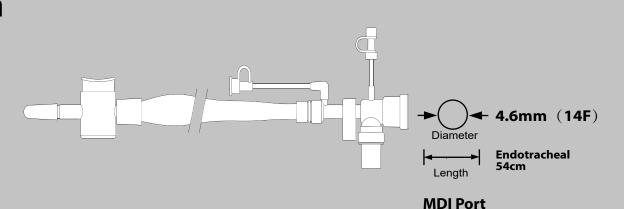
Trudell Healthcare Solutions 758 Baransway Drive London, Ontario Canada, N5V 5J7 Made in China

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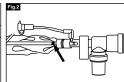


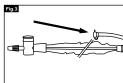
DO NOT RESTERILIZE

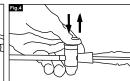


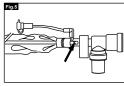














Directions For Use:

These instructions apply to the TruTest® Closed Suction System:

Warning:

- 1. Remove cap before starting continuous flow therapy. Failure to do so may result in serious injury or death.
- 2. Do not trim or cut the endotracheal tube (not supplied) while the TruTest® Closed Suction System is attached, otherwise the catheter may also be cut and that portion may be aspirated into the lower respiratory tract and may cause death or serious injury. 9. Use appropriate suction technique. Most experts suggest that
- 3. Do not re-use, reprocess, or resterilize this medical device. Re-use, reprocessing, resterilization may 1) adversely affect the known biocompatibility characteristics of the device, 2) compromise the structural integrity of the device, 3) lead to the device not performing as intended, or 4) create a risk of contamination and cause the transmission of infectious diseases resulting in patient injury, illness, or death.

Cautions:

- 1. If packing has been compromised do not use product.
- 2. If a heat and moisture exchanger (HME) is used, ensure that excess fluid does not enter the HME (not included).
- This is a single patient use only device.
- 4. The TruTest® Closed Suction System is intended to be used for a 72-hour period before changing. Change more frequently if catheter becomes heavily soiled during use.
- 5. Do not use 54 cm catheters on tracheostomy patients. Mucosal damage may result.

- 6. Select the appropriate size TruTest® Closed Suction System. Most experts suggest that the catheter selected should occupy no more than one half of the internal diameter of the artificial airwav.
- 7. Do not leave the catheter within the airway. Always pull back until the black stripe can be seen inside of the sleeve. Any catheter left extended into the airway will cause increased airway resistance.
- 8. When choosing an appropriate regulated vacuum level, consider that most experts suggest -80 to -120 mm/Hg (-10.7 to -15.9 kPa).
- the suction procedure should last no longer than 10 to 15 seconds and that actual duration of negative pressure should be no longer than 5 to 8 seconds per episode.
- 10. Always place the thumb valve in the locked position when not in use to prevent inadvertent activation. 11. This medical device is not made with di(2-ethyl hexyl) phthalate
- 12. The internal volume of patient end adapter is 6.5 ml. The internal volume of flex adapter is 33 ml.
- 13. Always use caution and good clinical judgment no matter what ventilator mode is in use. If the clinician notes any signs of suction intolerance such as oxygen desaturation, negative ventilator catheter pressures, patient stress or excessive discomfort, adjustments to the ventilator settings may need to be made. These adjustments (please refer to the ventilator's instructions for use) may include manipulation of the inspiratory trigger sensitivity, inspiratory volume or flow rate, and selection of a different ventilator mode: or may require the use of an alternate suction technique. Failure to follow the above precautions may increase the risk of positive and negative barotrauma.

Setup:

- . Select an appropriate size TruTest® Closed Suction System.
- 2. Apply suction tubing to thumb control valve.
- 3. Simultaneously depress and hold thumb valve and adjust vacuum regulator to desired level.
- 4. After releasing thumb control valve, attach the TruTest® Closed Suction System between patient and the breathing circuit.

Suggested Suction Procedure:

- 1. Make sure the isolation valve is open before advancing the catheter.
- 2. Always stabilize the TruTest® Closed Suction System and endotracheal (ET) adapter with one hand while pushing the catheter into endotracheal tube with the thumb and forefinger of the opposite hand (Fig. 1).
- 3. Advance catheter to desired depth.
- 4. Press and hold thumb control valve. Gently withdraw catheter and stop withdrawal when black marking ring is visible inside sleeve (Fig. 2).
- 5. Release thumb control valve.
- Repeat steps 1 5 as needed.
- Close the isolation valve.

Patient Lavage Instructions:

- 1. Catheter should be advanced 10 13 cm into the endotracheal tube
- 2. Instill desired amount of fluid into the lavage port.
- 3. Advance catheter to desired depth and follow the above suggested suction procedure.

Catheter Irrigation Instructions:

- 1. Switch off the isolation valve to isolate the irrigation chamber for a more efficient cleaning result.
- 2. The black marking ring must be visible in the sleeve (Fig. 2); then open cap on irrigation port.
- 3. Slowly introduce fluid into the port (Fig. 3), while depressing the thumb control valve (Fig. 4).
- 4. Irrigate until catheter is clear (Fig. 5).
- Close cap on port.
- 6. Lock the control valve by lifting and turning it 180 degrees (Fig. 6).
- 7. Position catheter and suction tubing beside breathing circuit.

Metered Dose Inhaler (MDI): (Not Included)

- Remove cap from MDI port and attach canister. Caution should be used to avoid discharge of canister when connecting.
- 2. Holding MDI canister in vertical position, depress during, or just prior to an inspiration cycle. Repeat as needed per physician or protocol.
- 3. Place cap on port after removing canister.

Day Sticker Usage:

1. The TruTest® Closed Suction System is intended for a 72-hour period. Apply the appropriate day sticker to the thumb control

Example: If the system is opened on Monday, place the Thursday sticker on thumb control valve.