

m|devices®

AN040000 – AN040007

Suction Catheter

Open Tip

Finger Control with Cap



INSTRUCTION FOR USE

DESCRIPTION

m|devices Suction Catheter with Finger Control with Cap are designed for easy passage through endotracheal and tracheostomy tubes, for the removal of airway secretions/debris that are unable to be spontaneously cleared.

Features an open distal end with an elliptical eye, soft clear tubing, incremental measurement markings and a stepped connector to connect easily to suction tubing.

FOR USE BY A QUALIFIED CLINICIAN. THE BELOW IS ONLY A SUGGESTION AND FACILITY PROTOCOL MUST BE FOLLOWED FOR ALL CLINICAL PROCEDURES WHERE THIS PRODUCT IS USED.

⚠ CAUTION

- DO NOT apply continuous suction to mucosal tissue.
- Tracheal damage may be caused by suctioning. This can be eliminated by using the appropriately sized suction catheter, appropriate suction pressures and only suctioning within the tracheostomy tube.
- Single use.
- DO NOT re-sterilise.
- DO NOT store at extreme temperatures and humidity, avoid direct sunlight. Handle with care.
- STERILE (EO), DO NOT use if the package or product has been damaged or contaminated.
- EU Notice: any serious incident that has occurred in relation to the device should be reported to the manufacturer and the competent authority of the Member State in which the user and /or patient is established.

STEPS FOR NASOPHARYNX, OROPHARYNX SUCTIONING

1. Select appropriate size suction catheter.
2. Open the packaging to expose the connection point.
3. Connect the catheter to the suction tubing which has been connected to an appropriate suction device.
4. Adjust the suction pressure according to facility protocol.
5. Remove the catheter from the packaging, ensuring aseptic technique is maintained
6. Test for adequate suction by occluding the thumb control port with your thumb with the catheter tip placed in a small container of sterile water.
7. Additional water-soluble lubricant can be applied to the tip of the catheter if facility protocol allows.
8. With the thumb control port remaining open, gently insert the catheter tip into the desired pathway (nasopharynx, oropharynx or nares)
9. Activate intermittent suctioning by occluding the thumb control port whilst gently withdrawing the catheter in a rotating motion until removed.
10. Re-commencement of appropriate ventilation/oxygenation immediately followed, if applicable.
11. Dispose of catheter as per facility protocol.

STEPS FOR TRACHEOSTOMY SUCTIONING

1. Select appropriate size suction catheter for the tracheostomy tube. This should be measured prior from the tube connector to the end of the tracheostomy tube. The tip should not protrude past the tracheostomy tube end when suctioning.
2. Open the packaging to expose the connection point.
3. Connect the catheter to the suction tubing which has been connected to an appropriate suction device.
4. Adjust the suction pressure according to facility protocol.
5. Remove the catheter from the packaging, ensuring aseptic technique is maintained.
6. Test for adequate suction by occluding the thumb control port with your thumb/finger with the catheter tip placed into a small container of sterile water.
7. Gently introduce the suction catheter tip into the tracheostomy tube to the pre-measured depth.

8. Apply finger to catheter vent and gently rotate the catheter while withdrawing. Each suction should be no longer than 5-10 seconds.
9. Assess patient's condition and repeat steps if clinically indicated.

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STERILE EO



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