



UR063003NS

Urine Bag Hanger

INSTRUCTION FOR USE

DESCRIPTION

m|devices Urine Bag Hanger is designed to simplify the attachment of urine bags to beds. Suitable for all major bag types.

Applying the urine bag can easily be achieved by using the two prongs on the urine hanger to attach to the corresponding perforated holes on the urine bag. The bag tubing can then be secured to the hanger using the pre-formed tubing holder that is located between the bed attachment.

CAUTION

- Single use.
- DO NOT re-sterilise.
- DO NOT store at extreme temperatures and humidity, avoid direct sunlight. Handle with care.
- NON STERILE, 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

1. Attach desired drainage bag to the reinforced hanger by aligning up the two prongs on the hanger to the two pre-formed holes on the top corners of the drainage bag.
2. Secure the attachment points to ensure the bag is adequately stabilised to prevent accidental detachment.
3. Secure the urine bag tubing to the bag hanger by gently placing the tubing into pre-formed tubing holder located between the bed attachments. Check to ensure the tubing isn't kinked.
3. Attach the hanger to the bed or desired location.

PRECAUTIONS

- Ensure the drainage bag is always at or below the height of the patient's bladder.
- Check the securement of attachments prior to attaching to bed/desired location.
- Check that the urine bag tubing is kink free post placement within the pre-formed tubing holder.

- When deflating the balloon, once the syringe is connected to the non-return valve, allow the pressure within the inflated balloon to push the plunger back and fill the syringe with water.
- Do not inflate catheter balloon above its stated capacity.

Possible complications with indwelling catheters include irritation or injury of urethral mucosa or, encrustation leading to blockage and catheter induced infections. Catheter use should be routinely monitored according to facility policies and guidance.

Contraindications

For urethral:

Acute urethritis

Acute prostatitis

Urethral/bladder trauma

For suprapubic:

Non palpable bladder

Instable suprapubic stoma

Known or suspected carcinoma of bladder

Immature stoma track (less than 4 weeks)

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