## **Suggested Suction Procedure**

- 1. (Fig. 1) Attach suction tubing to the connector on the vacuum control device (G). Connect suction tubing to the hospital vacuum system.
- **(Fig. 1)** Attach a day label to the vacuum control device indicating the date of use.
- 3. (Fig. 1) Attach the 15 mm male connector (B) of the patient end adaptor to the breathing system (machine-end); the 15 mm female connector (C) to the patient's artificial airway (patient-end).

**Note:** A corrugated connector (optional accessory) can be attached between the 15 mm male connector (B) and the breathing system if needed.

- 4. **(Fig. 2)** Unlock the switch of the vacuum control device (H).
- 5. (Fig. 2) Hold the patient end adaptor with one hand. Carefully advance the catheter down the airway with the other hand.
- 6. Advance catheter( D ) to desired depth. For endotracheal tube type, line up the marking numbers. There are no markings on tracheostomy tubes. Follow hospital procedures when advancing the catheter.
- 7. (Fig. 3) Hold the vacuum control device (G) and depress switch of vacuum control device (H).
- 8. (Fig. 4) Then gently withdraw catheter ( D ) until the black ring ( F ) is visible on the distal side of the patient-end adaptor.
- 9. Repeat steps 5-7 above if necessary.

#### **Catheter Irrigation**

- 1. **(Fig. 5)** Open cap on irrigation port ( J ) . A prefilled saline vial or a 15ml syringe filled with saline is prepared to be used.
- 2. **(Fig. 5)** Attach saline vial/syringe to the irrigation port.
- 3. Depress the switch of vacuum control device ( H ) for saline to ender the irrigation chamber ( A ) . Ensure the non-return valve is closed and continue to irrigate until the catheter is clear of secretion.
- 4. Close the cap of irrigation port( J ).
- 5. (Fig. 6) Lock the switch of vacuum control device ( H ) when not in use to prevent accidental depression.
- 6. Turn off the vacuum after use. If the suction catheter is disconnected in-line use, put the protective cap (1) on the end of vacuum control device (G).

#### Disconnection (optional accessory)

- 1. A disconnect wedge (optional accessory) can be used for easier disconnection with Sunset Standard Closed Suction System from the patient's airway by steps below (Fig. 7).
- 2. Press upwards against the thumb to disconnet the system.
- 3. After use, the product must be disposed in conformance with the local hygiene and waste disposal protocols and regulation.

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Made in Taiwai





# **Standard**

# **Closed Suction System for Pediatric**



## **General Instructions For Use**

#### **Intended Use**

Sunset Standard Closed Suction System is intended for tracheostomy suction of ventilator dependent pediatric patients. It is operated by health professionals in medical institutions for single patient use.

• Recommended period of use is 24 hours or if visibly soiled or faulty. Defer to institutional policy/quidelines for changeout indications.

#### **Product Description**

Sunset Standard Closed Suction System consists of 3 essential parts: a suction catheter with a protective sleeve, a vacuum control device and a patient end adaptor with a flushing system. The device connects between the breathing circuit and the artificial airway for simultaneous suction and ventilation.

#### Contraindications

The device intends to suck the secretions from the patients with artificial airways. The pulmonary secretions from a patient' s artificial airways should be removed to prevent its obstruction, otherwise, they cause the patient' s death or to be lethal. Therefore, there is no absolute contraindication to the closed suction system.

#### Size

Product Code	Catheter Length	Remark	Outer Diameter	Packaging	ISO Colour
VENCSS6-305	305mm	Tracheostomy	6FR / 2.0 mm	20ea/box	
VENCSS8-203	203mm	- Tracheostomy	8FR /2.67 mm	20ea/box	
VENCSS8-355	355mm				
VENCSS10-203	203mm	Tracheostomy	10FR /3.33 mm	20ea/box	
VENCSS10-405	405mm				

#### Symbol



Caution



Sterilized using ethylene oxide



Contains or presence of phthalate-DINP



 $R_{
m only}$  a physician Sale by or on the order of

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