Deluxe 72hr



Closed Suction System for Adults

General Instructions for Use

Intended Use

Sunset Deluxe 72 Closed Suction System is intended for endotracheal or tracheostomy suction of ventilator dependent adult patients. It is operated by health professionals in medical institutions for single patient use.

- Recommended period of use is 72 hours or if visibly soiled or faulty. Defer to institutional policy/guidelines for changeout indications.
- For the series used with tracheostomy tubes, the length of catheter is 305mm and is indicated on the pack.

Product Description

Sunset Deluxe 72hr 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. It features for an isolation valve design for longer 72-hour use. There are different catheter lengths of the device, one for endotracheal tube and one for tracheostomy tube, and it can be with or without a MDI port.

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 Color
VEN365100A / VEN365100AM	540mm	Endotracheal	10FR /3.33 mm	20ea/box	
VEN367100A / VEN367100AM					
VEN366100A / VEN366100AM	305mm	Tracheostomy			
VEN368100A / VEN368100AM					
VEN365120 / VEN365120M	540mm	Endotracheal	12FR /4.0 mm	20ea/box	0
VEN367120 / VEN367120M					
VEN366120 / VEN366120M	305mm	Tracheostomy			
VEN368120 / VEN368120M					
VEN365140 / VEN365140M	540mm	Endotracheal	14FR / 4.67 mm	20ea/box	
VEN367140 / VEN367140M					
VEN366140 / VEN366140M	305mm	Tracheostomy			
VEN368140 / VEN368140M					
VEN365160 / VEN365160M	540mm	Endotracheal	16FR / 5.3 mm	20ea/box	
VEN367160 / VEN367160M					
VEN366160 / VEN366160M	305mm	Tracheostomy			
VEN368160 / VEN368160M					

M = with MDI port

Symbol PHT DINP DATEX

EN / Caution

EN / Contains or presence of phthalate-DINP

EN / Does not contain natural rubber latex

EN / Do not use if package is damaged

EN / Do not reuse

EN / Do not resterilise

EN / Do not use in MRI

EN / Temperature limitation Upper limit: 49°C Lower limit: 5°C

EN / Consult instructions for use



Warning

- 1. Do not use endotracheal length catheter in patient with tracheostomy tube. The extra length may cause mucosal tissue injured. Do not use tracheostomy length catheters for endotracheal tubes. The short length will result in insufficient suctioning.
- 2. This is single use product. Do not reuse or resterilizethis device. Reuse and resterilization may lead to the device not preforming as intended, malfunction or create a risk of cross infection.
- 3. Do not CUT endotracheal tube while Closed Suction System is attached. Otherwise, the suction catheter may be cut and the cut portion of catheter may be aspirated into lower respiratory tract.

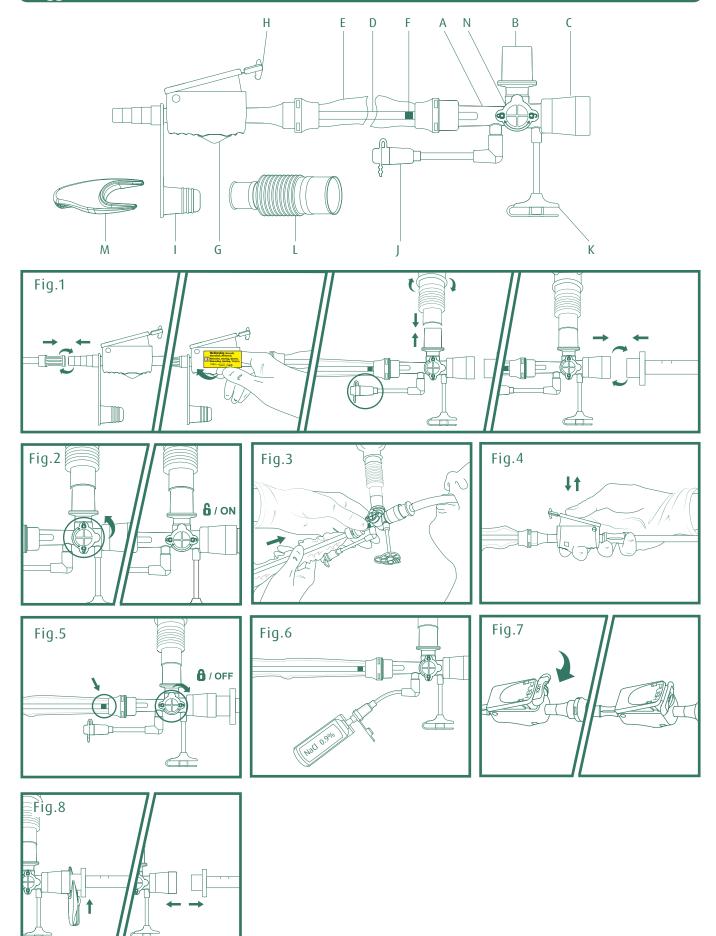
Caution

- 1. Check the product package before use. Do not use if product packaging has been damaged.
- 2. Withdraw suction catheter from the patients until the black marking can be seen on the distal side of patient-end adaptor.
- 3. Do not pull suction catheter out of patient-end adaptor.
- 4. Ensure the isolation is locked prior to rinsing the catheter.
- 5. The product should be handled by trained and qualified clinicians.
- 6. Rx Only Federal law restricts this device to sale by or on the order of a physician.
- 7. For the series used with tracheostomy tubes, the length of catheter is 305mm and is indicated on the pack.
- 8. Do not leave catheter within the airway, it will cause increased airway resistance.
- 9. Recommended vacuum settings: 80 to 120mm/Hg.
- 10. The entire suction procedure should last no longer than 10 to 15 seconds.
- 11. When used in conjunction with other manufacture's products always refer to their instruction for use.
- 12. Excess fluid in heat and moisture exchangers (HMEs) or heat and moisture exchanging filters (HMEFs) may increase resistance to flow. Follow manufacturer's instructions and replace HME(F).

Pre-Use Check

- There are no standard connections for suction catheter, hospitals should qualify the tubing fits the Series of Sunset Deluxe Closed Suction Systems.
- Inspect the package before opening. Ensure the product has not been compromised.
- Select the appropriate catheter length and size following clinical guideline. It is recommended that the catheter size is no more than half the size of patient's artificialairway.

Suggested Suction Procedure



Suggested Suction Procedure

- 1. **(Fig. 1)** Attach the 15 mm male connector of the patient end adaptor (B) to the breathing system (machine-end); the 15 mm female connector (C) to the patient's artificial airway (patient-end).
- 2. **(Fig. 1)** The included corrugated connector (L) may be attached between the 15 mm male connector (B) and the breathing system if needed.
- 3. **(Fig. 1)** Attach the suction tube with the hospital vacuum system to the catheter-end connector of the vacuum control device (G).
- 4. (Fig. 1) Attach a day label stick to the vacuum control device indicating the date of use.
- 5. **(Fig. 2)** Unlock the cover of the vacuum control device (H) . The operation of isolation valve (N) must be rotated to an open position.
- 6. (Fig. 3) Hold the patient end adaptor with one hand. Carefully advance the catheter down the airway with the other hand.
- 7. Advance catheter 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.
- 8. (Fig. 4) Depress and hold the vacuum control device (H).
- 9. (Fig.5) Then gently withdraw catheter until the back ring (F) is visible on the distal side of the patient-end adaptor.
- 10. Repeat steps 6-8 above as necessary.

Catheter Irrigation

- 1. **(Fig. 5)** Rotate the operation of isolation valve (N) back to a closed position. Do not turn the isolation valve unless the back ring (F) is clearly visible on the distal side of the irrigation chamber (A).
- 2. **(Fig. 6)** Open cap on irrigation port (J). A prefilled saline vial or a 15ml syringe filled with saline is prepared to be used.
- 3. **(Fig. 6)** Attached saline vial/syringe to the irrigation port.
- 4. Depress the the cover of the vacuum control device (H) for saline to enter the irrigation chamber (A). Continue to irrigate until the catheter is clear of secretion.
- 5. Close the cap of the irrigation port (1).
- 6. (Fig. 7) Lock the cover of the vacuum control device (H) when not in use to prevent accidental depression.
- 7. Keep the isolation valve (N) in locked position.
- 8. Turn off the vacuum after use. If the suction catheter is disconnected in-line use, protective cap (1) on the end of vacuum control device (G).

Metered Dose Inhaler (MDI)

- 1. Remove cap of the MDI port (K), and attach canister. Avoid discharge of canister when connecting.
- 2. Hold canister in vertical position. Depress canister during inspiration cycle. Repeat as prescribed by physician or protocol.
- 3. Remove canister and close cap on MDI port (K).

Disconnection

- 1. **(Fig. 8)** Disconnect the Sunset Deluxe closed suction system from the patient's airway slide the disconnect wedge (M) between the airway connector and 15 mm female connector of closed suction system.
- 2. Press upwards against the thumb, disconnecting the system.
- 3. Following use, the product must be disposed in conformance with the local hygiene and waste disposal protocols and regulation.

