Flow Rate / Injection Log

Pressure Injectable Two-Lumen CVC Information

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Catheter tested for ten (10) pressure injections.¹

7^{Fr.} **2**^{Lumen}

Pressure Injectable Two-Lumen CVC

cm catheter

C-47702-102A, Rev. 1 (8/09)

length

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Patient Label

Pressure Injectable Two-Lumen CVC Information

Catheter tested for ten (10) pressure injections.¹

Lumen

catheter length

	Using maxir	Using maximum viscosity media ² at body temperature (11.8 Centipoise (cP) at 37°C)				
	At 300 psi li	njector Pressure Setting	At 400 psi Inject Maximum Indicat			
Catheter Lumen	Pressure Injection Flow Rate	Maximum Catheter Pressure During Flow Rate	MAX Indicated Pressure Injection Flow Rate	Catheter Pressure During Maximum Flow Rate	Minimum Static Burst Pressure ³	
Distal (14 Ga.)	7 mL/sec	72 psi	10 mL/sec	99 psi	397 psi	
Proximal (18 Ga.)	7 mL/sec	104 psi	10 mL/sec	184 psi	300 psi	

¹ Tested using 125 mL injection volume.

² See Pressure Injectable Catheter Performance chart below for information on lower viscosity contrast media.

³ Static Burst Pressure is the failure point of the catheter when the lumen is completely occluded.

Occluded catheter failure occurred at or above this minimum pressure.

⁴ Achieved using 400 psi rated 60" administration set tubing and nominal injector values.

Injector equipment pressure variation may result in slightly diminished flow rates.



Pressure Injectable Catheter Performance:

For pressure injection equipment limited to 300 psi, the following chart (graph) shows the maximum achievable flow rates as a function of viscosity.

Contrast Media Viscosity at 37°C	MAX Flow Rate Distal Lumen at 300 psi	MAX Flow Rate Proximal Lumen at 300 psi	
11.8 cP	7 mL/sec	7 mL/sec	
9.4 cP	8 mL/sec	8 mL/sec	
6.3 cP	10 mL/sec	9 mL/sec	
4.7 cP	10 mL/sec	10 mL/sec	





Pressure Injection Warnings and Precautions Warnings: Cautions:

- Assess each patient for appropriateness of a pressure injection procedure. Pressure injection procedures must be performed by trained personnel well versed in safe technique and potential complications.
- 2. Obtain a visual image to confirm catheter tip position prior to each pressure injection.
- Ensure patency of each lumen of catheter prior to pressure injection to minimize the risk of catheter failure and/or patient complications.
- Discontinue pressure injections at first sign of extravasation or catheter deformation. Follow hospital/ institutional protocol for appropriate medical intervention.

- Do not exceed ten (10) injections or catheter's maximum recommended flow rate located on product labeling and catheter luer hub to minimize the risk of catheter failure and/or tip displacement.
- 2. Warm contrast media to body temperature prior to pressure injection to minimize the risk of catheter failure.
- 3. Pressure limit settings on injector equipment may not prevent over pressurizing an occluded or partially occluded catheter.
- Use appropriate administration set tubing between catheter and pressure injector equipment to minimize the risk of catheter failure.
- Follow the contrast media manufacturer's specified instructions for use, contraindications, warnings, and precautions.

Pressure Injection Instructions: A Suggested Procedure

Use sterile technique.

Warning: Obtain a visual image to confirm catheter tip position prior to each pressure injection.

- **1.** Remove injection cap from appropriate extension line of catheter.
- 2. Check for catheter patency:
 - Attach 10 mL syringe filled with sterile normal saline.
 - Aspirate catheter for adequate blood return.
 - Vigorously flush catheter.

Warning: Ensure patency of each lumen of catheter prior to pressure injection to minimize the risk of catheter failure and/or patient complications.

- 3. Detach syringe.
- Attach pressure injection administration set tubing to appropriate extension line of catheter according to manufacturer's recommendations.

Caution: Do not exceed ten (10) injections or catheter's maximum recommended flow rate located on product labeling and catheter luer hub to minimize the risk of catheter failure and/or tip displacement.

5. Inject contrast media in accordance with hospital/institutional protocol.

Caution: Warm contrast media to body temperature prior to pressure injection to minimize the risk of catheter failure.

- 6. Disconnect catheter from pressure injector equipment.
- 7. Flush catheter using 10 mL syringe or larger filled with sterile normal saline.
- Disconnect syringe and replace with sterile injection cap on catheter extension line.

NOTE: Do not exceed ten (10) pressure injections.



See Instructions for Use (IFU) for additional information.