



## **REF ASK-17702-KR**

## **Two-Lumen CVC**

- Two-Lumen Catheter: 7 Fr. (2.5 mm OD) x 20 cm Spring-Wire Guide, Marked: .032" (0.81 mm) dia. x 23-5/8" (60 cm) (Straight Soft Tip on One End "J" Tip on Other) with Arrow Advancer

- Advancer
  Catheter: 18 Ga. x 2-1/2" (6.35 cm) Radiopaque over 20 Ga. RW
  Introducer Needle
  Injection Needle: 22 Ga. x 1-1/2" (3.81 cm)
  Injection Needle: 25 Ga. x 1-1/2" (3.81 cm)
  Injection Needle: 18 Ga. x 1-1/2" (3.81 cm)
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  Introducer Needle: 18 Ga. x 1-1/2" (3.81 cm)
  Introducer Needle: Echogenic 18 Ga. x 2-1/2" (6.35 cm) XTW
  Pressure Transduction Probe
  Introducer Needle: 22 Ga. x 2-3/4" (7 cm) TW
  Svringe: 10 mL Luer-Slio Introducer Needle: 22 Ga. x 2-3/4" (7 cm) TW
  Syringe: 10 mL Luer-Slip
  Syringe: 5 mL Luer-Slip
  Arrow® Raulerson Spring-Wire Introduction Syringe: 5 mL
  Tissue Dilator: 8 Fr. (2.7 mm) x 9 cm
  Dust Cap: Non-Vented
  SecondSite™ Adjustable Hub: Fastener
  SecondSite™ Adjustable Hub: Catheter Clamp
  Medicine Cup: 60 mL

1: SharpsAway® Disposal Cup
1: Drape: 35" x 50" (89 cm x 127 cm) with 4" (10 cm) fenestration, with adhesive
1: Drape: 30" x 44" (76 cm x 112 cm)
1: Needle Holder
1: Scalpel: #11
2: Stopcock: 4-way
2: Prep Sponge Swab
6: Gauze Pad: 4" x 4" (10 cm x 10 cm)
1: Dressing: OpSite®1 4-3/4" x 4" (12 cm x 10 cm)
1: Suture: 3-0 Silk with Curved Needle
2: Tray: Prep
14 registered trademark of T.J. Smith & Nephew, Limited.

<sup>1</sup>A registered trademark of T.J. Smith & Nephew, Limited.

C Lumen	Priming Volume* (mL)	Gravity Flow Rate† (mL/hr)	
Distal (14 Ga.)	0.60	5337	
Proximal (18 Ga.)	0.43	1453	

\* Priming volumes are approximate and are done without accessories. † Flow rate values are approximate and are determined using deionized water at 100 cm head height.

Not made with natural rubber latex. Sterilized using ethylene oxide unless otherwise indicated in the contents list. Fluid path components are non-pyrogenic.

Warning: Read all package insert warnings, precautions, and instructions prior to use. Failure to do so may result in severe patient injury or death.

MD II







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