Bioprot 3  Closed Blood Draw/Closed Flush System for Peripheral Arterial Line Blood Draw

Directions for Use for Neonate/Pediatric Patients

After Priming and Set up of Kit and Startup of Pressure Monitoring:

1. Turn the white lever on flush syringe to point toward the transducer. Also turn off any other lines flowing into the peripheral arterial line.

2. Double swab the two lab sites near the patient’s catheter with alcohol or desired antiseptic. Allow to dry.

3. Using a 1ml. slip tip vented syringe, pre-set to draw .6ml. to .7ml. Push/twist to insert in the (BLUE) upper lab site closest to the transducer. Holding the syringe stable in the port, allow the patient’s pressure to fill the syringe with saline until .6 to .7ml. is drawn. Leave this syringe with waste/clearance fluid in place.

4. Close the pinch clamp between 2 lab sites to fully occlude tubing.

5. Access the lower lab site, nearest the patient with a 1ml. slip tip vented syringe, pre-set for the desired amount of blood draw, using a push/twist to insert, and allow the patient’s pressure to fill syringe to pre-set level. Gently remove this syringe when filled, do not allow to “pop” out of the site, and cap to prevent air contamination or leakage.

6. Open the pinch clamp between 2 lab sites.

7. Gently remove the waste syringe from the upper lab site and discard. (Do not allow syringe to “pop” out of the site.)

8. Go to the Bioprot 3 Flush Syringe and rotate the white lever on syringe device clockwise until white lever points to the patient. Very slowly over a period of 20-30 seconds, give 1.5ml. to 2ml. of flush solution to push blood in line back into patient and flush the peripheral catheter. (If more flush is needed in syringe, draw up desired amount prior to flushing line.)

9. At the end of the flush, maintain positive pressure on the syringe and rotate the white lever on Bioprot 3 Syringe clockwise until white lever is back to monitoring position. (facing air, opposite flush bag line)

10. Turn the zero port stopcock on transducer back to normal monitoring position. Swab the 2 lab sites to remove any residual blood.

Note: Lab sites should be elevated after draw to allow any residual blood to clear.