Rocket Seldinger Chest Drain Kit
INSTRUCTIONS FOR USE

Scope: These instructions cover all R51549-12-PK, R51549-16-PK Rocket Seldinger Chest Drain Kits and derivatives.

This device should only be used by, or under the supervision of, appropriately trained personnel and in conjunction with current local clinical practice guidelines.

Upon removal from package, inspect the product to ensure no damage has occurred.

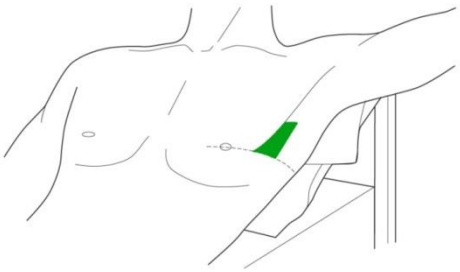
Product Description: The Rocket Seldinger Chest Drain Pack contains a Disposable gown, fenestrated drape, skin preparation sponge and galli pot, No 11 safety Blade Scalpel, 10ml syringe, 20ml syringe, safety green needle, safety orange needle, introducer needle, needle safety device, marked wire guide, 10cm SG dilator(s) with initial 5cm active length, fir tree and wide bore tubing set connectors, 3 way tap, coaxial chest tube inserter, clear drainage catheter with radiopaque stripe and fixation devices.

Indications: The product has been designed for percutaneous introduction of a chest tube for drainage of air and/or pleural fluid.

Contraindications: Non-pleural drainage.
12Fg & 16Fg – Not for drainage of thick fluids

Instructions For Use:

1. Following local hospital policy, and with wearing the sterile gown included, prepare the chest tube insertion site with an approved solution such as povidone-iodine and drape with fenestrated drape included to maintain and aseptic technique.
2. Identify and mark the insertion point following current practice guidelines.
3. After injection of local anaesthetic, make a small skin incision 4-5mm.

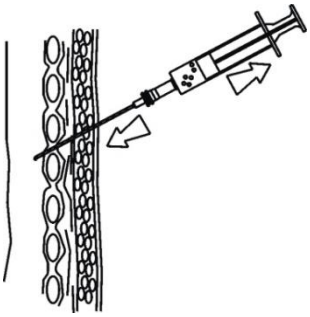


CAUTION: Insertion should be just ABOVE the rib to avoid damage to the intercostal neurovascular bundle.

When removing the protective sheath, hold the silicone ring to prevent it from being removed from the needle.

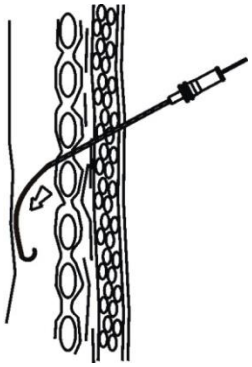
The measurement provided by using the silicone ring can be used to determine if the correct length of dilator is being used, and if the safety guard needs to be removed.

4. Attach the introducer needle to a syringe filled with a local anaesthetic e.g. lignocaine, and administer additional local anaesthetic to the skin and underlying tissues.



5. Advance the introducer needle over the *superior* border of the rib and into the pleural space. Fluid or air should be aspirated to verify correct position.
6. The needle should be introduced and directed with appropriate orientation inferiorly or superiorly.

7. Remove the syringe and advance the soft “J” end of the wire guide through the needle and into the pleural space. Before removing the needle, move the silicone measurement ring down to the patient’s skin.



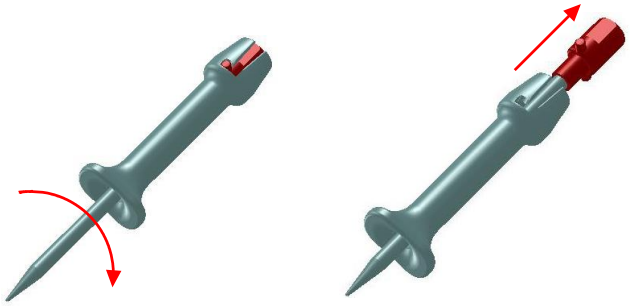
> **CAUTION**: The wire guide should pass through the needle and advance into the pleural space without resistance.

8. Remove the introducer needle. If no longer needed place needle in the port of the NeedleVISE needle safety device.

9. Using the measurement obtained using the depth marker on the introducer needle; measure against the safety guard dilator to ensure the correct length of dilator is being used. If the depth required is longer than the preset 50mm then remove the Safety Guard as described below.

If the chest depth of the patient is greater than 50mm, then remove the Safety Guard from the dilator.

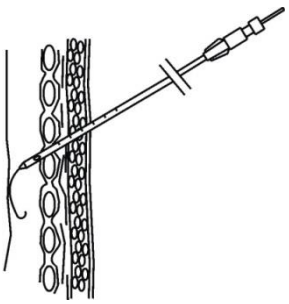
1.Hold the safety guard and the distal end of the dilator.
2.Turn the dilator clockwise to unlock it from the safety guard.
3. Push the dilator out from the safety guard.



> **WARNING: Over insertion of the dilator into the chest cavity is associated with serious injury and MUST be avoided. Only insert the dilator sufficient to dilate the superficial track**

> **CAUTION**: Ensure sufficient length of wire guide remains external to the chest to facilitate controlled introduction of the dilators and drain.

10. While maintaining the wire guide position, dilate the track and opening into the pleural space by advancing and withdrawing, one by one, the supplied dilator(s) over the wire guide. Introduction into the pleural space is facilitated by rotating and advancing the dilators in the same plane as the wire guide to prevent kinking.

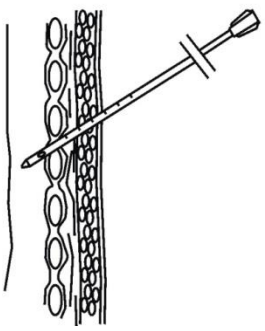


11. Remove the final dilator from the wire guide

12. Locate the drain set. Insert the free end of the guide wire into the distal catheter tip ensuring it travels through the stiffening tube.

13. With the wire guide still positioned within the pleural space, advance the chest tube inserter/chest tube assembly over the wire guide and into the pleural space.

> **CAUTION**: It is important to advance the chest tube assembly into the pleural space whilst maintaining its direction in the same plane as the wire guide. This will make introduction easier and avoid kinking of the wire guide.



> **CAUTION**: Ensure all side holes of the chest tube are positioned within the pleural space.

14. Remove the wire guide and chest tube inserter leaving the chest tube in place.

15. The chest tube can now be secured to the skin by using the fixation device R54560-DG-FX or suture or both and is ready for connection to a suitable sealed drainage system such as the Rocket Blue Bottle or Rocket Ambulatory Bag

16. Confirm the correct positioning of the drain with imaging as soon as possible.

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How to use the Swann Morton Safety Scalpel

1. Grasp the scalpel and carefully extend the blade by moving the slide toward the tip of the scalpel, using the thumb of the hand holding the scalpel.
2. Extend the slider until you reach the positive stop, the slider will fit in the notch when it is completely extended.
3. To retract the blade, grasp the scalpel carefully and move the slide toward the back of the scalpel, using the hand holding the scalpel.
4. You should feel clicks as the blade is retracted and a positive stop once the blade is completely retracted.
5. To retract the blade permanently, move the slider past the notch at the back of the scalpel.
6. Dispose of the Swann Morton Retractable Disposable Scalpel in a puncture resistant container approved for sharps disposal, or in a manner consistent with your hospital procedure.

How to apply the R54960-DG-FX fixation device

Device Description: Skin fixation device for use with size 5Fg to 16Fg catheters. Fixation device can be used as a dressing if catheter has already been secured using a suture.

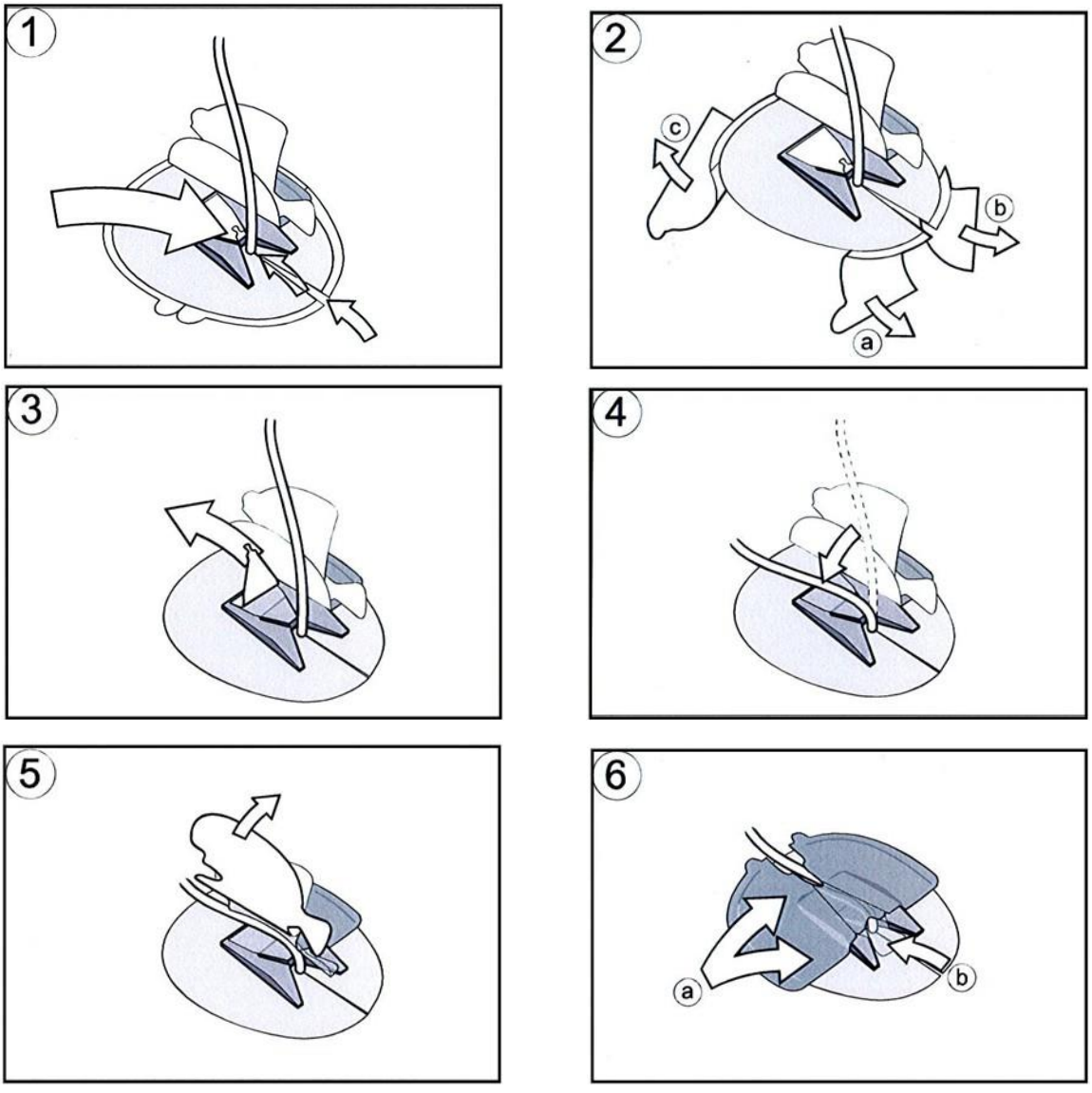
Indications

For use with 5Fg to 16Fg catheters only

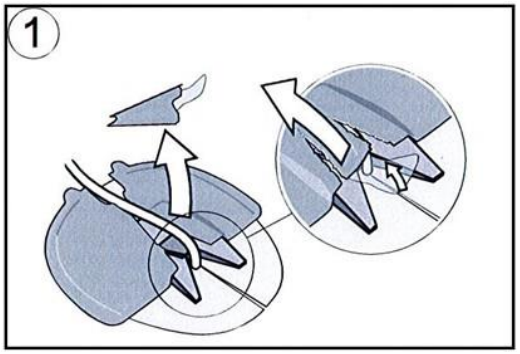
Contraindications

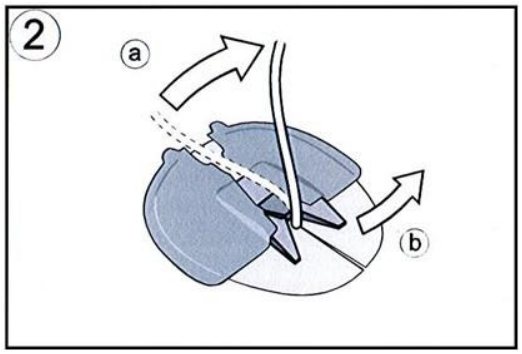
Not for use with catheters below 5Fg and above 16Fg

Procedure: For application of R54960-DG-FX follow the diagrams below.



Removing the Drain Guard





The use of R54960-DG-FX enables the following:

- Safe anchoring and protection of catheter for up to one week
- Inspection of puncture site
- Reduction of catheter movement and consequent enlargement of puncture site
- The patient to shower with catheter inserted
- Prevention of kinking of the catheter
- Prevents contamination of puncture site from environment
- And the transparent hydrocolloid cover allows continuous monitoring of the puncture site and provides an efficient protection against contamination

Disposal: This device should be handled and disposed of in accordance with local hospital policy and with regard to all applicable regulations, including but without limitation to, those pertaining to human health & safety and care of the environment.

NATURAL LATEX

This device is not manufactured with natural rubber latex

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CONTINUOUS USE SHOULD NOT EXCEED 28 DAYS
DO NOT RESTERILISE
Unless opened or damaged, contents of package are sterile.
Store at room temperature. Avoid prolonged exposure to elevated temperatures.
Manufactured in the UK by: **ROCKET MEDICAL PLC** Washington NE38 9BZ England www.rocketmedical.com

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