Pleura Cath®Chest Drainage System by PractiVet®

*Product is ETO Sterilized * DO NOT STEAM STERILIZE *High heat will damage valves!

Placement Procedure

1. Prepare the Pleura Cath by grasping the tip and terminal ½ inch in the jaws of a Kelly type hemostat as in figure 2.
2. Have an assistant grasp the skin over the anterior rib cage on the affected side and stretch the skin forward as far as possible. (This will place the tube in a tunnel under the skin when the skin is released) As an alternative, the skin incision can be made over the 10th rib and a tunnel made with a hemostat to reach the 7th or 8th intercostal space.
3. Identify the 7th or 8th intercostal space 1/3 of the way down from the dorsal rib to the sternum.
4. With the skin still pulled forward, make a small incision through the skin and SQ just anterior to the rib in the above location.
5. Force the tip of the hemostat containing the chest tube through the incision, intercostal muscle and pleura just anterior to the 8th or 9th rib. There will be a pop as you penetrate the pleura
6. Open the jaws of the hemostat and feed the chest tube forward and toward the anterior sternum. Pass the tube all the way to the first silicone suture skirt. Rotate the tube so that the skirt is positioned on top of the anterior tube so that it covers the portion of the tube that penetrates the chest.
7. Release the skin and begin suction with machine, syringe, or by using the pumping action created by squeezing the silicone chamber between its 2 valves.
8. Suture the skirt securely to the skin. It is recommended that a couple of the sutures penetrate the periostium just anterior to the rib.
9. Suture the second skirt to the skin allowing a small amount of slack to allow the patient maximum mobility.
10. Three methods of draining fluid and air from pleural space using the features of the Pleura Cath Chest Drainage System
    - Attach suction tubing to the provided tubing adapter that is plugged into the white luer port and suction off fluid or air.
    - Remove suction adapter from white luer port and attach syringe for aspiration of fluid or air.
    - Remove suction adapter and attach sterile IV tubing and an empty IV bag to the white luer connector. THIS IS THE PREFERRED METHOD FOR FLUID ONLY.
        1. Position empty IV bag below the level of the patient. Squeeze pump chamber between thumb and forefinger to begin pumping into the IV line. This will create a siphon effect so that fluid will continue to flow into the IV bag as long as it remains connected. This is the preferred method for maintaining continuous mild suction of the chest when it contains fluid.
        2. In the home environment the owner can use this pump/siphon method on an as needed, intermittent basis to remove fluid as it accumulates and causes discomfort to the pet.
        3. Whenever drainage is not necessary the provided luer cap should be in place to prevent contamination. As an alternative, a Clave® connector is available from your distributor through PractiVet. The Clave is a needleless, swabable, syringe or luer activated valve that eliminates the need for the luer cap and simplifies treatment.

Use of the Syringe-Activated Flush Port

The syringe-activated flush port contains a valve that is activated by inserting a syringe or male luer connector such as that on an IV line. This valve is always closed when not activated. It can be used to lavage the chest cavity, clear a tube obstruction, or instill medications into the pleural space. To maintain sterility keep cap on this port when it is not in use.

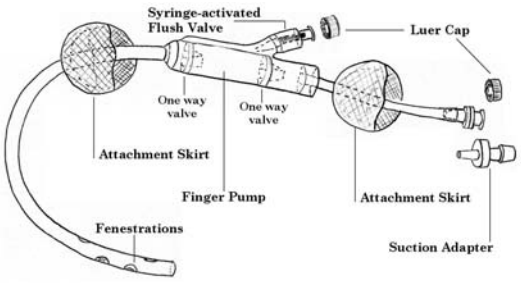

Fig. 1 Pleura Cath Components *

Fig. 2 Hemostat and Hand Position

* Patent pending