

# Philips SAFESET™

## Blood Sampling/Conservation System

### Quick Step Guide

**Priming** ...before priming, always calculate a "Discard Volume" as outlined in the Instructions for Use (Discard Volume is required for step 7 below)



- Check all connections for tightness on the Transpac 4 with SAFESET monitoring kit.
- If you are using an "add-on" SAFESET extension set, attach the female luer to the stopcock on the transducer of your monitoring kit.



- Remove the white vented cap from the female luer of the zeroing stopcock.
- Follow the manufacturer's instructions for clearing the monitoring system of air through the zeroing stopcock of the transducer.
- Change the white vented cap to a yellow non vented cap.



- Release the locking mechanism on the in-line reservoir by pressing the ridged area of the plunger clip. Pull the plunger back to approximately 2-3cc (2-3ml).
- Hold the in-line reservoir in the upright position with the top pointed up.



- Activate the flush device. Check for removal of air bubbles at the tip of the reservoir, allowing fluid to pass the 1-way stopcock distal to the reservoir. "Close" the reservoir until the plunger clip is locked.
- Continue to flush until all air is cleared from the system to reduce the risk of air emboli.



- Attach the male luer of the monitoring kit to the patient's catheter, being certain not to introduce air into the system during the connection procedure.

**Obtaining a Blood Sample** ...using a "cannula" sampling port (if using a "luer" sampling port refer to the Instructions for Use)



- Release the locking mechanism of the in-line reservoir by pressing on the ridged area of the plunger clip.
- Pull back on the plunger slightly to fill. Fill the reservoir no faster than 1cc (1ml) per second to avoid occlusion of the catheter.



- Once an appropriate Discard Volume (i.e. the amount that you calculated prior to Priming) is obtained in the in-line reservoir, turn the one-way stopcock that is *integral to the reservoir* "OFF". This is done by turning the handle perpendicular to the tubing.



- Per hospital policy, use disinfectant to cleanse the sampling port from which the sample will be drawn.



- Attach the blunt cannula, or blunt cannula with tube holder, to the blood collection device (e.g., syringe, blood tube holder).



- Insert the blunt cannula into the cleansed sampling port. Obtain the necessary amount of blood for a sample into the blood collection device.
- Insert the blood vacutainer if using a blood tube holder.



- Prior to removing the needleless access device, turn the one-way stopcock that is *between the sampling port and the patient* "OFF", if accessible.
- Remove the blood sampling device from the sampling port as a single unit.
- If using a syringe, aspirate slightly while removing the blood collection device from the sampling port as a single unit.



- Turn the one-way stopcock that is *distal to the sampling port* back to the "ON" position (handle of the stopcock parallel to the patient line).



- Turn the one-way stopcock that is *integral to the in-line reservoir* back to the "ON" position (handle of the stopcock parallel to the patient line).
- Return the fluid contained in the in-line reservoir back to the patient by slowly pressing down on the plunger.
- Return the reservoir volume to the patient at a rate of 1cc (1ml) per second, until the plunger reaches its locked position.



- Once the in-line reservoir is in the locked position, activate the flush device until the line is clear of all blood.

#### Troubleshooting Tips

- Reference the opposite side of this Quick Step Guide for helpful hints and reminders.

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### Troubleshooting Tips

#### To Prevent Blood Backing Up in Line Remember to...

- Ensure all connections in line are tightened
- Ensure reservoir is in the LOCKED position
- Pressurize IV container per hospital protocol
- Change vented (white) caps to non-vented (yellow) caps

#### To Prevent Air Bubbles in Line, Remember to...

- Ensure reservoir top is pointed up (one-way stopcock on top) with plunger pulled back to 3 ml when priming.
- Tap reservoir and transducer to ensure that all air bubbles have been eliminated when priming
- Invert and tap blood sampling ports to remove air bubbles when priming
- Draw back SLOWLY (1 ml or slower per second) on reservoir when drawing clearing volume
- Reinfuse the patient's blood slowly, no faster than 1 ml per second, by pressing the plunger back to the closed and locked position

#### When Using a Blood Tube Holder for Blood Sampling...

- Once blood sample has been obtained, turn the one-way stopcock between sampling port and patient to the "OFF" or perpendicular position
- Next, completely remove blood collection tube from Blood Tube Holder BEFORE disconnecting from sampling port
- Disconnect Blood Tube Holder and blunt sampling device TOGETHER from sampling port
- Turn one-way stopcock between port and patient to the "ON" position and flush line

#### When Using a Syringe for Blood Sampling...

- Once the blood sample has been obtained, and prior to removing syringe and cannula from sampling port, turn one-way stopcock between sampling port and patient to the "OFF" or perpendicular position
- Next, disconnect syringe and blunt sampling device TOGETHER from sampling port while slightly pulling back on syringe plunger
- Turn one-way stopcock between port and patient to the "ON" position and flush line

