Set Up 2002-400

Step 1. Fill Water Seal to 2cm Line
Add 45ml of sterile water or sterile saline via the suction port located on top of the drainage system. A pre-packaged water ampoule is provided on the back of each Ocean 2002-400. Twist top off the ampoule and insert tip into suction port. Empty the contents in the suction port. The water seal will fill to the 2 cm line and the water will turn blue for better visualization.

Step 2. Fill Suction Control A to desired suction level
Remove the grey vent plug, pour sterile water or sterile saline to desired suction level and replace the vent plug. (20cm H2O = 310cc)

Step 3. Connect Patient Tube to Patient
Use the attached connector. The chest drain is now on gravity drainage.

Step 4. Connect Suction to Chest Drain
Attach suction line to suction port on top of the chest drain. Turn suction source on until constant, gentle bubbling occurs in Chamber A.

Placement of the Unit
Always place the chest drain below the patient's chest in an upright position. To avoid accidental knock-over, open the floor stand for secure placement on the floor or hang the chest drain on the bed with the hangers provided.

What To Check During System Operation:

**Suction Control Chamber**
When suction is operating, constant, gentle bubbling in Chamber A should be present. Vigorous bubbling causes quicker evaporation & produces excessive noise. Too much bubbling? Dial the suction source down until you see constant, gentle bubbling. No bubbling? Turn the suction source up until you see constant, gentle bubbling.

**Water Seal Chamber**
The water seal protects your patient from atmospheric air going back towards the patient and the level of water should always be at 2cm. A rise in the water seal indicates negative pressure.

**Air Leak Monitor**
You can check for a patient air leak in Chamber C. When bubbles are observed going from right to left in the air leak monitor, this confirms a patient air leak. No bubbling with minimal float ball oscillation at bottom of water seal will indicate no air leak is present. If continuous bubbling in Chamber C is observed, check the catheter connectors and patient dressing for a partially withdrawn catheter.

**Collection Chamber**
The collection chamber incorporates a writing surface with easy-to-read fluid level calibrations.

**Positive Pressure Protection**
Atrium's positive pressure release valve E, located on top of drain, opens instantly to release accumulated positive pressure. Do not obstruct the positive pressure release valve.

**High Negativity Float Valve**
Atrium's high negativity float valve, with its controlled release action, enables any thoracic patient to draw as much intrathoracic pressure as is required during each respiratory cycle. During prolonged episodes of extreme negative pressure, Atrium's controlled release system will automatically relieve excess vacuum to a lower, more desirable pressure level.

**Sampling Patient Drainage**
Taking samples of patient drainage must be in accordance with approved hospital infection control standards. Fluid samples can be taken directly from the patient tube by forming a temporary dependent loop and inserting a 20 gauge or smaller needle at an oblique angle.

**System Disconnection**
Clamp patient tube prior to disconnecting patient tube from patient. Clamp off all indwelling thoracic catheters prior to disconnecting chest drain from patient.

**System Disposal**
Disposal of system and contents must be in accordance with approved hospital infection control standards.

Full product IFU and instructions can be found on our website: www.atriummed.com

Have a question or need help in a hurry?
Call Atrium at +31-297-230-420