Oasis™

DRY SUCTION CHEST DRAIN

Instructions For Use

USA GB Dry Suction Chest Drain

ATRIUM

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Description

The Atrium Oasis™ chest drain is a disposable, dry suction operating system with 2100ml collection volume, dry suction regulator, and calibrated water seal. Selected models include a graduated air leak monitor. Sterile fluid (provided with selected models) is required for water seal operation and air leak detection. The Oasis drain is packaged sterile, or is packaged in a sterile fluid path format (only the contents of the sterile patient tube pack can be entered into the sterile field). This chest drain is non-pyrogenic and is for single patient use only. Models equipped with a patient tube in-line connector provide convenient system change out or attachment of an Atrium in-line ATS Bag for postoperative autotransfusion. Oasis ATS models include a filtered collection chamber with an access line for continuous autotransfusion with an infusion pump, or for use with an Atrium self-filling ATS blood bag.

Indications For Use

- Evacuate air and/or fluid from the chest cavity or mediastinum.
- Help re-establish lung expansion and restore breathing dynamics.
- Facilitate postoperative collection and reinfusion of autologous blood from the patient's pleural cavity or mediastinal area.

Warnings

1. Do not obstruct the positive pressure relief valve located on top of drain.
2. Do not manually depress high negativity vent when patient is on gravity drainage or when suction is not operating.
3. Do not separate patient tube in-line connector prior to clamping off patient tube first.
4. Do not keep patient tube clamp closed during drainage collection or patient transport.
5. Do not puncture patient tube with an 18 gauge or larger needle.
6. Do not use or puncture needleless luer port with needle.
7. Dual collection models (2 patient tubes) require both patient tubes to remain connected to the patient. When using dual collection models with only one patient tube connection (1 tube only), the patient tube not in use must remain securely clamped off at all times.

Precautions

1. For sterile fluid path models, only the contents of the sterile patient tube pack can be entered into the sterile field.
2. Do not overfill water seal above the 2cm fill line.
3. Suction source should be set to -80mmHg or higher for chest drain regulator settings of -20cmH_2O or greater.
4. Chest drain must be kept below the patient's chest in an upright position.
5. Replace chest drain if damaged or when collection volume meets or exceeds maximum capacity.
6. Patient tube connections, water seal, suction regulator and bellows should be checked regularly to confirm proper operation.
7. Pre-packaged sterile fluid for chest drainage use only.

Set Up

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 drain. For models available with sterile fluid, twist top off bottle and insert tip into suction port. Squeeze contents into water seal until fluid reaches 2cm fill line.
Step 2. **Connect Patient Tube To Patient** – Connect chest drain to patient prior to initiating suction.
Step 3. **Connect Suction To Chest Drain** – Attach suction line to suction port on top of chest drain.
Step 4. **Turn Suction Source On** – Increase suction source vacuum to -80mmHg or higher. Suction regulator is preset to -20cmH_2O. Adjust as required.

Set Up for Sterile Fluid Path Models

Step 1. **Connect Patient Tube To Patient** – Open sterile patient tube pack and pass only the sterile patient tube into sterile field. Close patient tube clamp prior to connecting patient tube to catheter.
Step 2. **Fill Water Seal To 2cm Fill Line** – Add 45ml of sterile water or sterile saline via the suction port located on top of the drain. For models available with sterile fluid, twist top off bottle and insert tip into suction port. Squeeze contents into water seal until fluid reaches 2cm fill line.
Step 3. **Connect Patient Tube To Chest Drain** – Pass distal end of patient tube out of sterile field for connection to chest drain. Connect patient tube to chest drain prior to initiating suction.
Step 4. **Connect Suction To Chest Drain** – Attach suction line to suction port on top of chest drain.
Step 5. **Turn Suction Source On** – Increase suction source vacuum to -80mmHg or higher. Suction regulator is preset to -20cmH_2O. Adjust as required.

Placement of Unit

Always place chest drain below the patient's chest in an upright position. To avoid accidental knock-over, place the unit on the floor or hang it bedside with the hangers provided.

Gravity Drainage

Disconnect the suction line and maintain drain below the patient's chest in an upright position.

Suction Port

Suction port is located on top of the drain. It is not required to cap off suction port when suction is not connected or operating.

Suction Source

Suction source should provide a minimum vacuum pressure of -80mmHg at 20 liters of airflow per minute for a suction control setting of -20cmH_2O or greater.

Suction Bellows

Suction bellows will expand to the s mark or beyond when suction is connected and operating at a regulator setting of -20cmH_2O or higher. If the bellows is expanded but less than the s mark, **increase the suction source vacuum to -80mmHg or higher.** For regulator settings less than -20cmH_2O, any visible bellows expansion in bellows window will confirm suction operation.

Dry Suction Regulator

Suction regulator is preset to -20cmH_2O and can be adjusted from -10cmH_2O to -40cmH_2O. To change suction setting adjust rotary suction regulator dial located on the side of the drain. Dial **down to lower** suction pressure and dial **up to increase** suction pressure. To lower regulator setting from a higher level (-40cmH_2O) to a lower level (-20cmH_2O), adjust regulator down to lower setting and then temporarily depress the manual high negativity vent located on top of the drain to reduce excess vacuum.

Water Seal

The water seal must be filled to the 2cm fill line for system operation and air leak detection. Once filled, water seal becomes tinted blue. When air bubbles are observed going from right to left, this will confirm an air leak.

Air Leak Monitor
For those models with a graduated air leak monitor, air leak bubbling can range from 1 (low) to 5 (high). Air bubbles create an easy to follow air leak pattern for monitoring patient air leak trends.

Collection Chamber
The Oasis 3600 Adult • Pediatric Model:

The first collection chamber is calibrated in 1ml increments up to 100ml and 2ml increments up to 200ml.
Chamber two is calibrated in 10ml increments up to 1090ml.
Chamber three is calibrated in 10ml increments up to 2100ml.

The Oasis 3612 Baby Drain Model:

The pediatric collection chamber is calibrated in 1ml increments up to 100ml and 2ml increments up to 200ml.

The Oasis 3650 ATS Model:

The first collection chamber is calibrated in 10ml increments up to 1100ml.
Chamber two is calibrated in 10ml increments from 1110ml up to 2100ml.

Fluid level graduations are accurate within ± 3ml or 3% of scale.

Changes in Patient Pressure
With suction on, patient pressure will equal suction control setting **A** plus the height of water seal column level **B**. For gravity drainage (no suction) patient pressure will equal the height of the calibrated water seal column level only.

Manual High Negativity Vent
To lower the height of the water seal column and to lower chest drain vacuum pressure when connected to suction, depress the high negativity vent located on top of the drain until the water seal column lowers to the desired level.

Positive Pressure Relief Valve
PPRV located on top of drain opens instantly to release positive pressure.

Sampling Drainage
Must be in accordance with approved hospital infection control standards. Selected models include a needleless luer port on the patient tube connector for sampling patient drainage. Alcohol swab luer port prior to syringe attachment (no needle). Samples can also be taken directly from the patient tube by inserting a 20 gauge needle or smaller with syringe. Alcohol swab patient tube prior to inserting syringe needle at a shallow angle.

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

System Disposal
Disposal of chest drain and its contents should be in accordance with all applicable regulations.

SYMBOLS USED ON PRODUCT LABELS

REF CODE NUMBER LOT LOT NUMBER

STERILE EO STERILE. STERILIZED BY ETHYLENE OXIDE.

SEE PACKAGE INSERT SINGLE USE ONLY EXPIRATION DATE

ATS BAG COMPATIBLE ATS CHAMBER

S F P STERILE FLUID PATH PACKAGE Rx Only PRESCRIPTION ONLY

LF LATEX FREE

Latex Free

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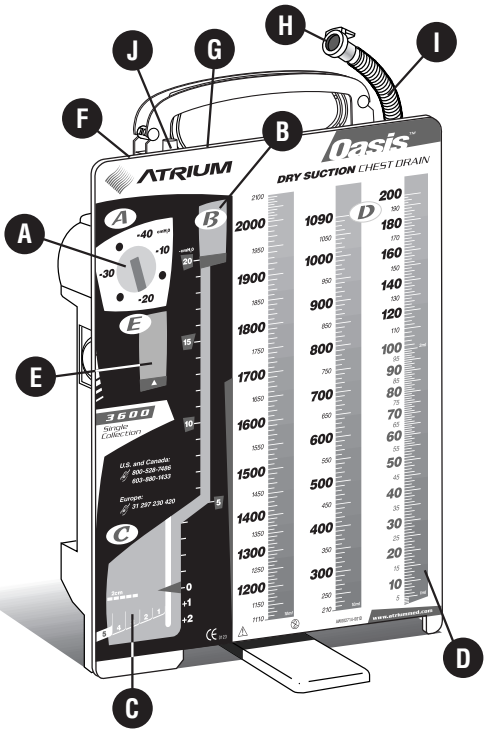

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- **A** Suction Control Regulator
- **B** Water Seal Chamber
- **C** Air Leak Monitor
- **D** Collection Chamber
- **E** Suction Monitor Bellows
- **F** Positive Pressure Release Valve
- **G** Manual High Negativity Vent
- **H** In-Line Connector
- **I** Patient Tube(s)
- **J** Suction Port

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