GROSHONG®
Central Venous Catheter

Ordering Information

Product Code	Lumens	French Size	Overall Length (cm)	Tip to Cuff Length (cm)	OD (mm)	Repair Kit
☐ 7711700	Single	7 F	51.58	24	2.2	☐ 7741700 body
☐ 7711800	Single	8 F	52.04	24	2.5	☐ 7741800 body
☐ 6626954	Dual	9.5 F	74.3	18	3.2	☐ 7742000 body ☐ 7740000 red and white legs
☐ 7726950	Dual	9.5 F	74.3	24	3.2	☐ 7742000 body ☐ 7740000 red and white legs

Replacement Connectors (10 units/case)

Product Code	For Use With	Replaces	French Size	Lumens	Color
☐ 7712700	7 F Single Lumen	Pink Connector	7 F	Single	Pink
☐ 7712800	8 F Single Lumen	Orange Connector	8 F	Single	Orange
☐ 7712500	9.5 F Dual Lumen	Red Connector	9.5 F	Dual	Red
☐ 7712510	9.5 F Dual Lumen	White Connector	9.5 F	Dual	White

Accessories (5 units/case)

Description	Product Code
Stainless Steel Tunneler	☐ 0601940

Tray Components

- GROSHONG® Silicone Catheter with SURECUFF® Tissue Ingrowth Cuff
- Peel-Apart Introducer
- 18 G Introducer Needle
- 18 G Needle
- 22 G Needle
- 25 G Needle
- 45 cm Guidewire (0.035 in.)
- Tunneler
- End Cap(s)
- Syringes
- Scalpel
- Connector(s)
- Attachable Suture Wing
- Sponge, Prep Swab
- Gauze (10 cm x 10 cm)
- Drape, Fenestrated

REPRESENTATIVE'S NAME

CONTACT PHONE NO.

PHYSICIAN'S SIGNATURE

Product and Packaging Do Not Contain Natural Rubber Latex

GROSHONG® Central Venous Catheter

Indications For Use

GROSHONG® Long-Term Catheters are designed for long-term vascular access and for use in patients that lack adequate peripheral venous access. They are available in single lumen and multi-lumen catheters. All GROSHONG® central venous catheters are designed for the administration of I.V. fluids, blood products, drugs, and parenteral nutrition solutions, as well as blood withdrawal.

Contraindications

The device is contraindicated whenever: • The presence of device related infection, bacteremia, or septicemia is known or suspected. • The patient's body size is insufficient to accommodate the size of the implanted device. • The patient is known or is suspected to be allergic to materials contained in the device. • Severe chronic obstructive lung disease exists (percutaneous subclavian placement only.) • Past irradiation of prospective insertion site. • Previous episodes of venous thrombosis or vascular surgical procedures at the prospective placement site. • Local tissue factors will prevent proper device stabilization and/or access.

Warnings

• Intended for Single Patient Use. DO NOT REUSE. Bard Access Systems products are single use devices and should never be reimplanted. Reuse carries with it the attendant concern of cross-infection regardless of the cleaning or sterilization method. Resterilization of incompletely cleaned devices may not be effective. Any device that has been contaminated by blood should not be reused or resterilized. After use, this product may be a potential biohazard. Handle and discard in accordance with accepted medical practice and applicable local, state and federal laws and regulations. • Pinch-off Prevention: Catheters placed percutaneously or through a cut-down, into the subclavian vein, should be inserted at the junction of the outer and middle thirds of the clavicle, lateral to the thoracic outlet. The catheter should not be inserted into the subclavian vein medially, because such placement can lead to compression of the catheter between the first rib and the clavicle, which can cause damage and even severance of the catheter. A radiographic confirmation of catheter placement should be made to ensure that the catheter is not being pinched by the first rib and clavicle. [1,2]

Cautions

• Carefully read and follow all instructions prior to use. • Federal (U.S.A.) law restricts this device to sale by or on the order of a physician. • Only qualified healthcare practitioners should insert, manipulate and remove these devices.

Precautions

Follow Universal Precautions when inserting and maintaining the catheter. Follow all contraindications, warnings, cautions, precautions and instructions for all infusates as specified by its manufacturer. Use aseptic techniques whenever the catheter lumen is opened or connected to other devices. Povidone-iodine is the suggested antiseptic to use with this device and components. Acetone and tincture of iodine should not be used because they could adversely affect the performance of the catheter and connectors. 10% acetone/70% isopropyl alcohol swabsticks used for dressing changes should not adversely affect the catheter. • Examine package carefully before opening to confirm its integrity and that the expiration date has not passed. The device is supplied in a double sterile package and is non-pyrogenic. Do not use if package is damaged, opened or the expiration date has passed. Sterilized by ethylene oxide. Do not Resterilize. • Fill (prime) the device with normal saline solution to help avoid air embolism. • Avoid accidental device contact with sharp instruments and mechanical damage to the catheter material. Use only smoothedged atraumatic clamps or forceps. • Avoid perforating, tearing or fracturing the catheter when using a guidewire. • Do not use the catheter if there is any evidence of mechanical damage or leaking. • Avoid sharp or acute angles during implantation which could compromise the patency of the catheter lumen(s). • Use suture wings to secure catheters. • Do not place sutures directly around the catheter.

Possible Complications

The use of an indwelling central venous catheter provides an important means of venous access for critically ill patients; however, the potential exists for serious complications including the following: • Air Embolism • Bleeding • Brachial Plexus Injury • Cardiac Arrhythmia • Cardiac Tamponade • Catheter or Cuff Erosion Through Skin • Catheter Embolism • Catheter or Cuff Occlusion • Catheter Occlusion, Damage or Breakage due to Compression Between the Clavicle and First Rib • Catheter-related Sepsis • Endocarditis • Exit Site Infection • Exit Site Necrosis • Extravasation • Fibrin Sheath Formation • Hematoma • Hemothorax • Hydrothorax • Intolerance Reaction to Implanted Device • Laceration of Vessels or Viscus • Perforation of Vessels or Viscus • Pneumothorax • Spontaneous Catheter Tip Malposition or Retraction • Thoracic Duct Injury • Thromboembolism • Venous Thrombosis • Ventricular Thrombosis • Vessel Erosion • Risks Normally Associated with Local and General Anesthesia, Surgery, and Post-Operative Recovery These and other complications are well documented in medical literature and should be carefully considered before placing the catheter.

References

1. Aitken, D.R. and Minton, J.P. "The Pinch-Off Sign: A Subclavian Catheters", American Journal of Surgery, Vol. 148, Nov. 1984, pp. 633-636.
2. Rubenstein, R.B., Alberty, R.E., et al. "Hickman® Catheter Separation", JPEN, Vol. 9, No. 6, Nov./Dec. 1985, pp. 754-757.

Please consult package inserts for more detailed safety information and instructions for use.

BPV/CVCA/0116/0007(1)

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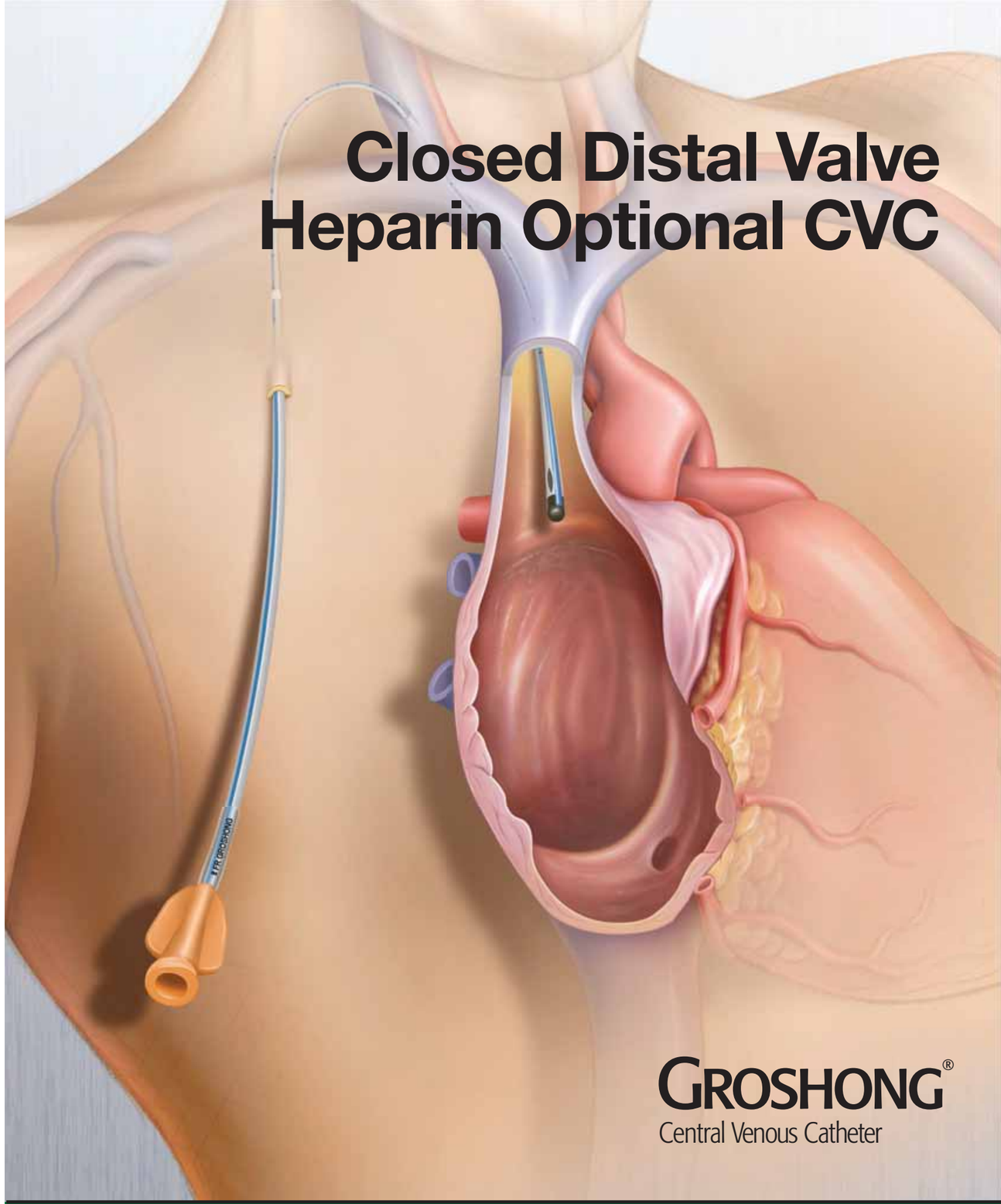


Advancing Lives and the Delivery of Health Care™

BARD

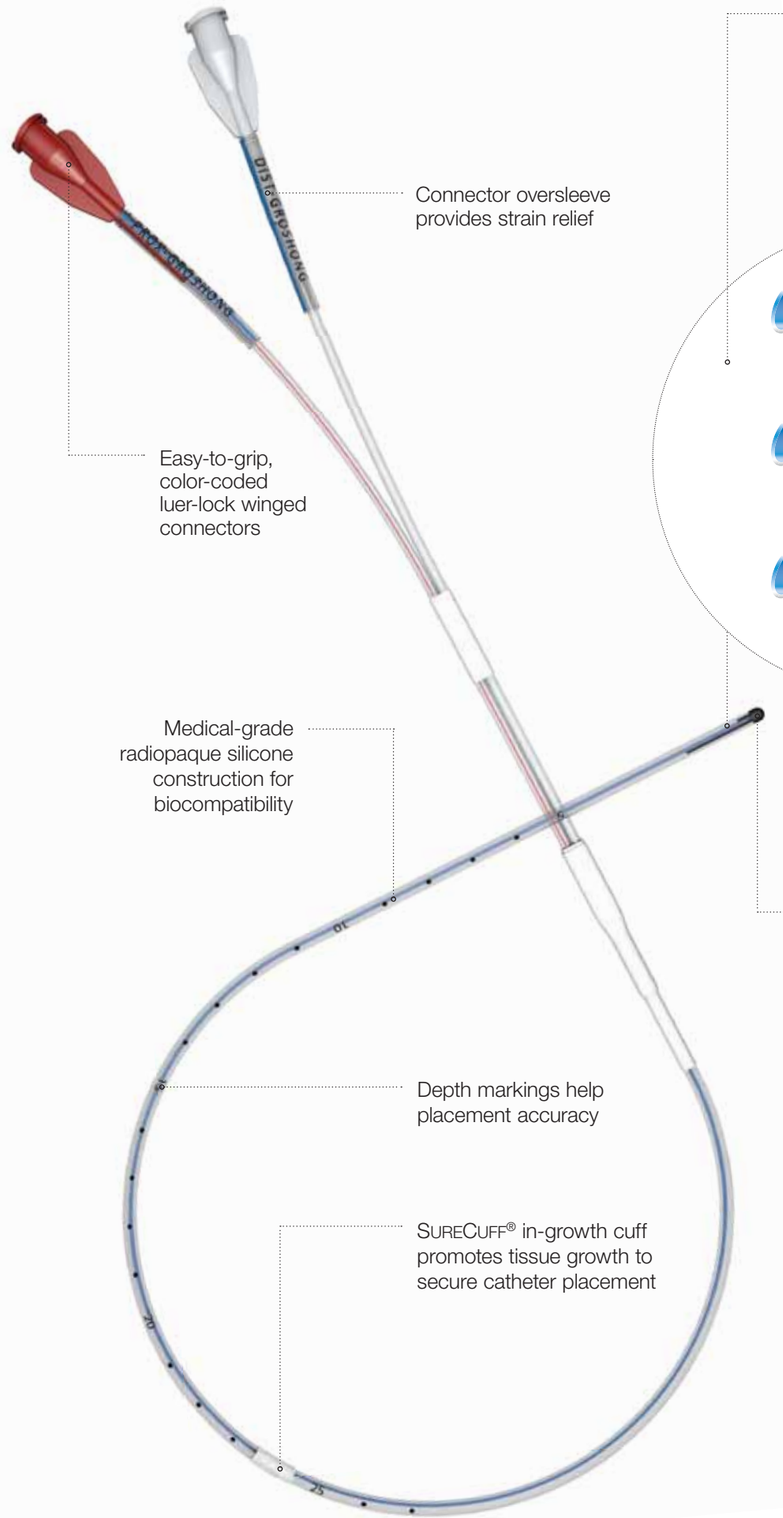
Designed for long-term use, the three-way valve of the GROSHONG® Central Venous Catheter provides a low-maintenance solution for administration of fluids, blood products, medications, and blood withdrawals.

Unique Valve Technology

- The three-way valve eliminates heparinization and reduces the need for clamping
- Reduced risk of blood reflux and air embolism

Low-Maintenance and Cost Effective

- Only one saline flush per week is needed when not in use
- Reduced heparin use requires less nursing time



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