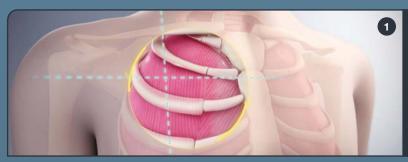


Rocket® Pleural Vent

INSTRUCTIONS FOR USE - PREPARATION & DRAINAGE



Identify the correct site for insertion.

The Pleural Vent is recommended for insertion into the 2nd Intercostal space at the mid clavicular line.

Following local hospital policy, prepare the catheter insertion site with an approved solution and drape as required to maintain aseptic technique.

Administer appropriate and adequate local anaesthetic to the catheter insertion site and the underlying tissue.

Using the scalpel make a skin incision of 4-5mm.





Remove the centre sections of the dressing. Slowly insert the needle through the skin incision over the superior border of the rib and into the pleural space.



During insertion through the intercostal muscle, the needle hub window will show RED to indicate the needle tip is exposed.

As the needle passes through the parietal pleura a distinct 'click' can be heard as the spring loaded obturator snaps forward to aid in protecting the internal organs from the needle point.



Check the hub window is showing GREEN to indicate the obturator is fully forward.



When the placement of the needle and catheter has been correctly verified as being in the pleural cavity, remove the needle and syringe from the one-way valve by gently rotating the connection cap anti clockwise.

Slowly advance the catheter into the pleura whilst removing the needle from the catheter.



As you remove the needle, the blue indication diaphragm will deflect upwards.



When the needle is fully removed, and the catheter is in the pleura, ensure the stitch plate is evenly against the patient's chest wall.



Attach the valve cap.



The blue diaphragm will move up and down in time with respiration.



Perform a check x-ray to confirm the position of the catheter.

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