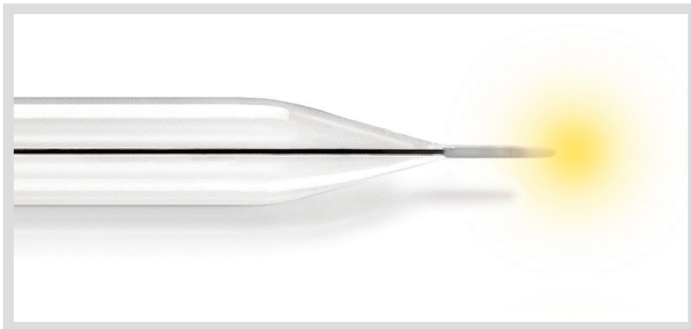


SENSATION 7Fr. IAB (FIBER-OPTIC) INSERTION GUIDE SHEATHED

CARDIOVASCULAR



SENSATION™ 7.Fr.

Insertion steps for SHEATHED insertion:

- 1 Make the customary preparations for percutaneous catheterization and administer local anesthesia.
- 2 Insert the angiographic needle into the common femoral artery at a 45 degree or less angle.
- 3 Insert the J-tip end of the 0.035" guide wire (labeled with orange tab "FOR SHEATH") through the angiographic needle and advance into the femoral artery.
- 4 Keeping the guide wire in place, remove and discard the needle.
- 5 Wipe the guide wire with a wet, lint free sponge.
- 6 Make a small incision at the exit of the guide wire to facilitate inserting the sheath introducer through the skin.
- 7 Insert the introducer dilator into the sheath hub and twist lock into place.
- 8 Place the tapered end of the introducer dilator over the exposed 0.035" sheath guide wire and advance the introducer with a rotary motion into the arterial lumen.
- 9 Remove the introducer dilator and 0.035" guide wire leaving the sheath in place.
- 10 Insert the J-tip end of the 0.018" guide wire (labeled with white tab "FOR IAB") through the introducer and advance into the thoracic aorta.

Catheter Preparation:

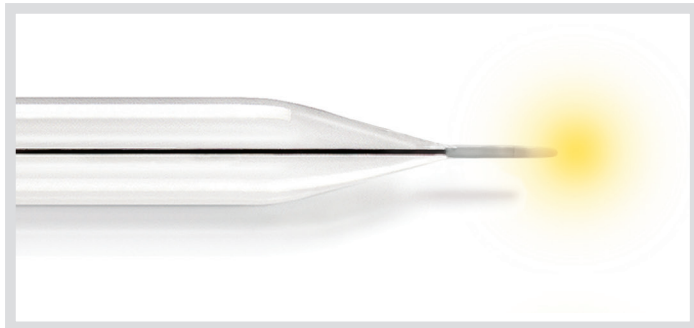
- 11 Firmly attach the 30cc syringe with one-way valve to the male luer fitting of the extracorporeal tubing.
- 12 With the 30cc syringe, slowly aspirate a full 30cc. Remove the syringe while leaving the one-way valve securely in place on the tubing to ensure vacuum is maintained.
- 13 Carefully remove the contents from the tray.
- 14 Remove the stylet from the inner lumen. Flush the catheter's inner lumen with 3-5 cc of flush solution.
- 15 Remove the blue T-handle from the catheter pulling straight out. DO NOT handle the IAB membrane, wipe the catheter prior to insertion, or twist the catheter during insertion.
- 16 Insert catheter over 0.018" guide wire to proper position (2 cm distal to the left subclavian artery): While maintaining control of the guide wire, advance in short, continuous, one inch (2.5 cm) strokes to avoid kinking the IAB catheter.

Initiating IAB Pumping (IABP):

- 17 Remove the guide wire. Aspirate and discard 3 cc of blood from inner lumen and immediately perform a manual flush with 3-5 cc of flush solution.
- 18 Using hospital protocol, connect a standard pressure flush apparatus to the hub of the inner lumen.
- 19 Remove the one-way valve from the male luer fitting of the catheter's extracorporeal tubing.
- 20 Connect the IAB catheter's male luer fitting to the female luer fitting of the catheter extender.
- 21 Connect the male luer fitting of the catheter extender tubing to the safety disk.
- 22 Insert the optical sensor connector into the IABP's Sensor Input on the Sensor Module.
- 23 Follow the IAB pump operating instructions to initiate pumping

SENSATION 7Fr. IAB (FIBER-OPTIC) INSERTION GUIDE
SHEATHLESS

CARDIOVASCULAR



SENSATION™ 7.Fr.

Insertion steps for SHEATHLESS insertion:

- 1** Make the customary preparations for percutaneous catheterization and administer local anesthesia.
 - 2** Insert the angiographic needle into the common femoral artery at a 45 degree or less angle.
 - 3** Insert the J-tip end of the 0.018” guide wire (labeled with white tab “FOR IAB”) through the angiographic needle and advance into the thoracic aorta.
 - 4** Keeping the guide wire in place, remove and discard the needle.
 - 5** Wipe guide wire with a wet, lint free sponge.
 - 6** Make a small incision at the exit of the guide wire to facilitate inserting the vessel dilator through the skin.
 - 7** Place the tapered end of the vessel dilator over the exposed 0.018” IAB guide wire and dilate the artery by pushing the vessel dilator into the arterial lumen.
 - 8** Keeping the guide wire in place – remove the vessel dilator.
 - 9** Wipe the guide wire with a wet, lint free sponge.
- Catheter Preparation:**
- 10** Firmly attach the 30cc syringe with one-way valve to the male luer fitting of the extracorporeal tubing.
 - 11** With the 30cc syringe, slowly aspirate a full 30cc. Remove the syringe while leaving the one-way valve securely in place on the tubing to ensure vacuum is maintained.
 - 12** Carefully remove the contents from the balloon tray.
 - 13** Remove the stylet from the inner lumen. Flush catheter inner lumen with 3-5 cc of flush solution.
 - 14** Remove the blue T-handle from the catheter pulling straight out: DO NOT handle the IAB membrane, wipe the catheter prior to insertion, or twist the catheter during insertion.
 - 15** Insert the catheter over the 0.018” guide wire to proper position (2 cm distal to the left subclavian artery): While maintaining control of the guide wire, advance in short, continuous, one inch (2.5 cm) strokes to avoid kinking the IAB catheter.
- Initiating IAB Pumping (IABP):**
- 16** Remove the guide wire. Aspirate and discard 3 cc of blood from inner lumen and immediately perform a manual flush with 3-5 cc of flush solution.
 - 17** Using hospital protocol, connect a standard pressure flush apparatus to the hub of the inner lumen.
 - 18** Remove the one-way valve from the male luer fitting of the catheter’s extracorporeal tubing.
 - 19** Connect the IAB catheter’s male luer fitting to the female luer fitting of the catheter extender.
 - 20** Connect the male luer fitting of the catheter extender tubing to the safety disk.
 - 21** Insert the optical sensor connector into the IABP’s Sensor Input on the Sensor Module.
 - 22** Follow the IAB pump operating instructions to initiate pumping.