

Clinical Call Line: 800-660-2660

Intera 3000 Hepatic Artery Infusion Pump Prep Procedure Checklist – For O.R. Staff O.R. Prep Kit Components

O.R. Prep Kit Components			
Tubing set/Collection syringe	Non-Coring 22 gauge Refill Needle	Special Bolus Needle	
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Staff	Task		
Circ and Scrub	Before patient is in the room, confirm sterile solution warmer is draped, filled with 1 liter of sterile solution (sterile water or sterile saline), turned on and set to 120°F.		
Circ and Scrub	1. Circulator serves HIGH DOSE Hep/Saline (30,000 units Hep/Saline, 1,000 units per mL, 30mL's) to sterile field. The scrub must draw up all 30mL's of the HIGH DOSE Hep/Saline in a 30mL syringe, confirm there is no air in the syringe.		
Circ and Scrub	2. Circulator dispenses LOW DOSE Hep/Saline (100 units/mL, minimum 50mL's) to sterile field. The scrub must draw up 10mL's of the LOW DOSE Hep/Saline in a 10mL syinge, confirm there is no air in the syringe.		
Surgeon	Asks for the pump to be prepped		
Scrub	3. Changes sterile gloves		
Circ	4. Delivers the AP03000H Intera 3000 HAI pump to sterile field using aseptic technique.		
Scrub	 Takes the pump out of inner sterile tray Cut off knot at tip of catheter (1/2 cm away from the knot) Place pump in the solution warmer (still set at 120°F). If needed, add additional sterile solution into the warmer until solution level reaches pump septum. The raised septum should remain exposed. 		
Circ	9. Deliver the refill needle, tubing set/collection syringe, and special bolus needle (see abosterile field. Do not deliver the backup Special Bolus Needle or backup Refill Needle u		

Scrub	 Connect the non-coring 22 gauge refill needle to the luer lock end of the tubing set/collection syringe. Secure both luer lock connections (barrel syringe to tubing and tubing to needle). Check that the tubing set clamp is in the open position. Insert non-coring refill needle into the middle of the pump septum perpendicularly (at 90 degree angle). Advance needle all the way and advance until it is in contact with the pump's needle stop. Allow contents to drain from the pump reservoir into the collection syringe. After the pump has emptied (level of pump contents has stopped rising in the collection syringe), close the tubing clamp in the middle of the tubing, disconnect the collection syringe containing the reservoir volume from the tubing set, leaving the refill needle and tubing in place. Discard the collection syringe. 	A CONTRACTION OF THE PARTY OF T
Scrub	 16. Connect the 30mL syringe containing HIGH DOSE Hep/Saline (30,000 units Hep/Saline, 1,000 units per mL, 30mL's) to the tubing set and open the clamp. 17. Begin injecting to fill the pump. At 5mL increments, release pressure on the plunger and allow 1mL of solution to return into the syringe (do not aspirate). Continue to do this until all 30mL's have been injected into the pump. Keep pressure on the syringe plunger and clamp the tubing in the center of the tube. 18. Remove needle, tubing set and syringe from the pump's septum and discard 	22 Gauge Non-coring Needle
Scrub	 Connect the 10mL syringe filled with 10mL's of LOW DOSE Hep/Saline (100units/mL) to the Special Bolus Needle. Insert the needle perpendicular (90 degree angle) into the pump septum and advance until it is in contact with the pump's needle stop. Inject 4mLs through the Special Bolus Needle, through the tip of the catheter. Clamp the tubing and remove the special bolus needle and syringe from the pump septum. Do not discard. The LOW DOSE Hep/Saline and Special Bolus Needle will be used by the surgeon later in the case. 	
Scrub	 22. Position the pump catheter tip over the edge of the basin so it is visible. 23. Reduce the temperature setting on the solution warmer to 95°F 24. Add at least 1.5 Liters of room temperature sterile water or sterile saline to the solution warmer basin. The septum may be covered with water at this time 25. Allow the solution warmer water to cool to 35°C (95°F). As soon as water is at this temperature, set a timer for ten minutes. 	
Scrub	 26. After 10 minutes at 35°C (95°F), dab off any drops that may have formed on the tip of the catheter. 27. Observe the catheter tip for flow (small bead at the end of the catheter) 28. Once a bead or drop appears at tip of catheter, the pump will be ready for implantation. 29. If the surgeon is not ready for the pump, increase the solution warmer temperature to 98°F and keep pump in solution warmer until implanted. 	

^{*} Papaverine & Methylene Blue can be presented to the field at any time