To prevent blood from backing up in line remember to:

- Ensure all connections in line are tightened.
- Ensure SafeSet reservoir is in the LOCKED position.
- Pressurize IV container per hospital protocol.
- Change vented (white) caps to non-vented (yellow) caps.

To prevent air bubbles in line remember to:

- Ensure SafeSet reservoir tip is pointed up (one-way stopcock on top) with plunger pulled back to 3 mL when priming.
- Tap reservoir and transducer to ensure that all air bubbles have been eliminated when priming.
- Invert and tap blood sampling ports to remove air bubbles when priming.
- Draw back SLOWLY no faster than 1 mL per second on reservoir when drawing clearing volume.
- Reinfuse the patient’s blood slowly, no faster than 1 mL per second, by pressing the plunger back to the closed and locked position.

When using a blood tube holder for blood sampling:

- Once blood sample has been obtained, turn one-way stopcock between sampling port and patient to the “off” or perpendicular position.
- Next, completely remove blood collection tube from Blood Tube Holder BEFORE disconnecting from sampling port.
- Disconnect Blood Tube Holder and blunt sampling device TOGETHER from sampling port.
- Turn one-way stopcock between port and patient to the “on” position and flush line.

When using a syringe for blood sampling:

- Once the blood sample has been obtained, and prior to removing syringe from sampling port, turn one-way stopcock between sampling port and patient to the “off” or perpendicular position.
- Next, disconnect syringe and blunt sampling device TOGETHER (or single syringe if using luer activated device (LAD) kit) from sampling port while slightly pulling back on syringe plunger.
- Turn one-way stopcock between port and patient to the “on” position and flush line.
To set up TransPac® IV with SafeSet:

- Check all connections for tightness.
- Pull SafeSet reservoir plunger tip back 2-3 mL from the closed and locked position.
- Spike the fluid source and insert the IV solution bag into the pressure administration cuff and hang it from the IV pole. (ICU Medical recommends that the system is primed using only gravity pressure.)
- Remove the white vented cover from the stopcock next to the transducer, activate the flush device (squeeze or pigtail), and fill the line slowly through the transducer and out the side port (zeroing port) of the stopcock closest to the transducer.
- Turn the handle off (towards the side port) and place a yellow non-vented cap on the side port.
- Ensure that the reservoir tip is pointed up, with the one-way stopcock on top. (Note: The plunger tip is still 2-3 mL from the closed and locked position.) Activate flush device to prime the reservoir tip. Once the fluid has passed the one-way stopcock, the plunger can be closed until it is in the locked position.
- Activate flush device to prime the patient line.
- Zero balance the monitor according to the monitor manufacturer’s recommendations.
- Check the entire system to ensure there are no air bubbles. At this point the transducer kit is ready to be connected to the patient catheter.

To obtain a blood sample:

- Release the locking mechanism on the reservoir by depressing the ridged plunger wings gently. Pull back on the plunger slowly, no faster than 1 mL per second, to aspirate an appropriate clearing volume.
- Once an appropriate clearing volume has been obtained, turn the one-way stopcock at the tip of the reservoir off by turning the handle perpendicular to the tubing. This will ensure that the sample will not contain any of the clearing volume.
- Per facility protocol, use disinfectant to cleanse the cannula access device (CAD) or LAD port from which the sample will be drawn.
- If using a CAD, attach the SafeSet blunt cannula to the blood collection device (syringe or Blood Tube Holder).
- Attach blood sampling device to either the CAD or LAD and aspirate the required blood for the sample.
- Turn the one-way stopcock at the tip of the reservoir on by turning the handle parallel to the tubing.
- Reinfuse the patient’s blood slowly, no faster than 1 mL per second, by pressing the plunger back to closed and locked position.
- Per facility protocol, use disinfectant to cleanse the port the sample was drawn from.
- Activate the flush device until the line is clear of all blood.