



Reference Guide to Properly Using the

Tego[®]

Needlefree Hemodialysis Connector



Attach the Tego to Patient's Catheter

- › Use aseptic technique to remove from package
- › Prime Tego in accordance with facility protocol
- › Attach male luer of Tego to dialysis catheter



Swab the Tego Before Each Access

- › Swab the Tego thoroughly around the sides and top before each access



Access the Tego with Syringe or Blood Lines

- › Do not use needles to access the Tego
- › Access of the Tego either through a syringe, blood line, or vacutainer should be straight on, not at an angle
- › Do not overtighten your luers (syringes, blood lines) when connecting to the Tego
- › Be sure not to continue to turn after you feel the luer stop
- › When using a luer slip vacutainer, only insert half-way with a slight turn clockwise into the Tego and then turn clockwise to come out



Flush the Tego with Normal Saline

- › When giving the post 10 mL saline lock through the Tego, leave a minimal amount of fluid in the tip of the syringe, as not to bottom out the syringe and cause reflux or a rebound effect
- › Be sure to grasp the base of the Tego and fully unthread your luers when disconnecting from the Tego

Functional Attributes

- › Straight fluid path accommodates flow rates of greater than 600 mL/min
- › Remains in place during the entire hemodialysis treatment period
- › Validated for continuous patient use for up to seven days
- › Silicone seal remains closed when not activated, closing the fluid path and eliminating blood exposure



Tego's saline flush option allows you to reduce heparin risks and reduce overall costs and time.