



High Flow Stopcock Extension Set

This device is not made with the plasticizer diethylhexyl phthalate (DEHP).

REF **HFST01**

Approximate priming volume 7.9 mL

1 UNIT

Indications For Use:

To provide multi-directional flow during fluid administration to patient's vascular system.

Contraindications:

None known.

Warnings:

1. Intended for single patient use only. DO NOT REUSE.
2. After use, this product may be a potential biohazard. Handle and discard in accordance with the accepted medical practice and applicable local, state, and federal laws and regulations.

Cautions:

1. Before using, examine the package carefully before opening to confirm its integrity and that the expiration date has not passed. The device is supplied in a sterile package and is non-pyrogenic.
2. Do not use if package is damaged, opened, or the expiration date has passed. Do not resterilize.
3. Do not use needles or blunt cannulae with the female luer injection site.
4. Do not use non-standard luer connectors.
5. Replace stopcock within 72 hours or per hospital protocol.
6. Flush injection site in accordance with hospital policy after or between injections.

Possible Patient Complications:

The potential exists for serious complication including the following:

1. Air embolism.

(OVER)

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ONLY

STERILE EO



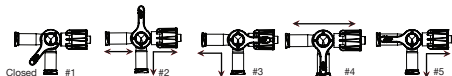
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Procedure — Use Aseptic Technique:

1. Using aseptic technique, remove the sterile device from the package and remove attached cap(s).
2. Prime the stopcock before use. Ensure that all air bubbles are removed.
3. The molded arrows on the stopcock handles indicate the open flow paths in relation to the 3 ports. Turning the stopcock handle to the intermediate position, as shown in illustration 1, can close all fluid paths.
4. Attach IV fluid device(s).
5. Ensure that all connections are secure.
6. ROTATE THE HANDLE TO SELECTED FLOW PATH SETTING.

See illustrations 2 through 5, for 4-way flow options.



Accessing the luer:

1. Remove attached cap.
2. Insert the male luer access device straight (not at an angle) into the female luer.
Hand twist clockwise until tight.
CAUTION: DO NOT overtighten. Do not use any instruments to tighten the connection.
Overtightening can damage the injection site.
3. The stopcock is now ready to use. Deliver IV fluid or medication in the usual manner; fluids may be infused or withdrawn (aspirated).
4. To disconnect an access device, close the appropriate stopcock flow path. Disconnect by twisting male luer connector from IV tubing or syringe counterclockwise until loose and apart. For slip luers, simply twist counterclockwise while pulling the syringe out of the stopcock.
5. Flush all ports in accordance with hospital policy after or between injections.
6. Cap the luer when not in use.
7. To reconnect, repeat Steps 1 and 2.

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