

with Auto-Priming Hemostatic Valve





# New auto-priming hemostatic valve

An automatic priming feature and built-in valve reduces blood exposure during connection and disconnection, offering many advantages.

- Eliminate the need for flush syringes and clamps
- Reduce the cost of supplies
- Simplifies clinical procedures and access management during hemodialysis
- Minimizes blood exposure

# Ensure high-quality outcomes and a more comfortable patient experience

Achieve optimal cannulation outcomes and elevate the patient experience.

- Plastic fistula needles have been shown to reduce vascular access complications <sup>1, 2, 3, 4</sup>
- Decrease risk of fistula infiltration during dialysis
- Improves patient outcomes with safer cannulation during fistula maturation <sup>2, 3, 4</sup>
- Improve patient comfort with a catheter that is more pliable compared to metal fistula needles
- Enhance patient mobility
- Fistula catheters for patients allergic to metal needles

"Access damage or access loss due to poor cannulation is a serious practice problem; it increases patient's morbidity and cost to the health-care system and has potential legal consequences. This study intensified the appreciation for the importance of optimal cannulation in prolonging access survival..."





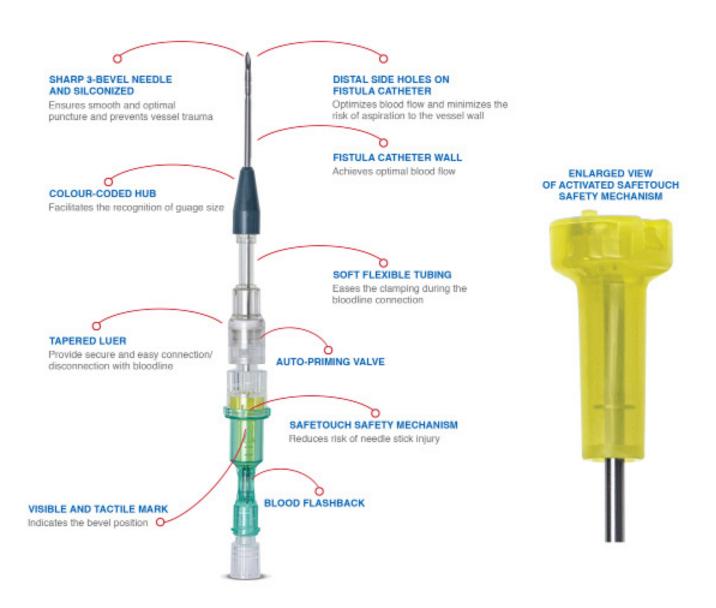
#### Safety first

- Safety mechanism is activated while needle is being withdrawn, eliminating potential for needle stick injury.
- A secured lock is confirmed by an audible and/or tactile click.
- Passive activation of safety mechanism is performed with single-handed technique

#### **Enhanced patient comfort**

- Polypropylene catheter material more pliable and improves patient comfort compared to metal fistula needles <sup>2, 3, 4</sup>
- Safetouch Dialysis Cath Plus accommodates challenging or tortuous access to achieve optimal cannulation outcomes 3, 4
- Ideal for the nocturnal dialysis patient as well as patients who may become restless during dialysis

Vascular Access is the gateway to quality of life for Renal Patients, Nipro is dedicated to supporting the best possible care for every vascular access. Safetouch Dialysis Cath Plus and IP Echo Handheld ultrasound are two innovative devices that support providing optimal cannulation outcomes.



### Ordering information

Product code	Description	Packaging
FSC+1525	SAFETOUCH DIALYSIS CATH PLUS 15GX1"	
FSC+1532	SAFETOUCH DIALYSIS CATH PLUS 15GX1-1/4"	
FSC+1538	SAFETOUCH DIALYSIS CATH PLUS 15GX1-1/2"	Inner box: 50 pcs/inner box
FSC+1625	SAFETOUCH DIALYSIS CATH PLUS 16GX1"	Outer box: 500 pcs/outer box
FSC+1632	SAFETOUCH DIALYSIS CATH PLUS 16GX1-1/4"	·
FSC+1638	SAFETOUCH DIALYSIS CATH PLUS 16GX1-1/2"	Shelf life: 3 years
FSC+1725	SAFETOUCH DIALYSIS CATH PLUS 17GX1"	Sterilization: Dry Gamma
FSC+1732	SAFETOUCH DIALYSIS CATH PLUS 17GX1-1/4"	
FSC+1738	SAFETOUCH DIALYSIS CATH PLUS 17GX1-1/2"	

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## Your link between patient and care

#### **REFERENCES**

- 1. Marticorena, R. M., Dacouris, N., & Donnelly, S. M. (2018). Randomized pilot study to compare metal needles versus plastic cannulae in the development of complications in hemodialysis access. *The Journal of Vascular Access*, 19(3), 272-282.
- 2. Marticorena, R. M., Kumar, L., Concepcion, J., Bachynski, N. D., Smith, I., Donnelly, S., ... & Battistella, M. (2018). CANNT ACITN. Ultrasound evaluation of intraluminal needle position during hemodialysis: Incidental findings of cannulation complications. *CANNT Journal*, 28(2), 3.
- 3. Marticorena, R. M., & Donnelly, S. M. (2016). Impact of needles in vascular access for hemodialysis. *The Journal of Vascular Access*, 17(1\_suppl), S32-S37.
- 4. Fielding, C., Bramley, L., Stalker, C., Brand, S., Toft, S., & Buchanan, H. (2022). Patients' experiences of cannulation of arteriovenous access for haemodialysis: A qualitative systematic review. *The Journal of Vascular Access*, 11297298211067630.
- 5. Parisotto, M. T., Pelliccia, F., Bedenbender-Stoll, E., & Gallieni, M. (2016). Haemodialysis plastic cannulae-a possible alternative to traditional metal needles? *The Journal of Vascular Access*, 17(5), 373-379.

