



Introcan Safety[®] Deep Access

Longer Length for Longer Dwell

Peripheral IV Catheter Failure

Accepted but Unacceptable¹



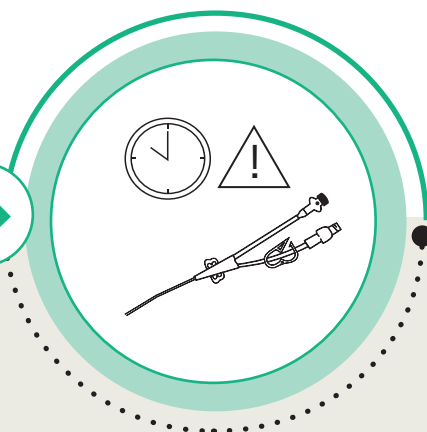
Up to **90%** of short length peripheral IV catheters fail before therapy completion¹



50% within 24 hours²

Reasons for catheter failure include: dislodgement, infiltration, extravasation and phlebitis. Peripheral IV catheter failure is more common in patients with difficult venous access (DVA) including those with a high BMI or with smaller or damaged superficial veins, such as those undergoing chemotherapy treatment or with a history of IV drug use³.

Multiple failed cannulation attempts have significant implications on patients, finances and resources:



Material cost of a failed cannulation;⁴

- Short length IV catheter
- Skin preparation
- Tourniquet
- Gloves
- Dressing
- Pre-filled syringe

Impact on the patient;⁵

- Multiple painful attempts
- Increased risk of infection
- Missed doses of medication
- Increased length of stay
- Escalation to a more costly invasive device

Escalation of patient;⁵

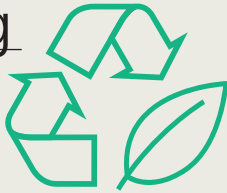
- If a midline or PICC is inserted, these are more costly and take longer to insert

Introcan Safety[®] Deep Access

Longer Length for Longer Dwell

Introcan Safety[®] Deep Access is a longer length IV catheter which is designed to facilitate ultrasound guided access to deeper veins. Introcan Safety[®] Deep Access serves as an alternative to multiple short length PIVCs which don't last the required duration of therapy or, as a simple to insert alternative to a midline.

A **saving**
of over
1 kg



of consumable waste per patient - equivalent to a bag of sugar*⁵

A cost saving of

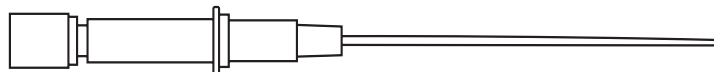


per patient*⁵

*Compared to a midline

94.3%

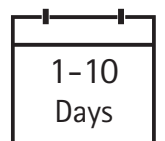
first stick cannulation success rate in patients with difficult intravenous access (DVA)⁵



of DVA patients, Introcan Safety[®] Deep Access remained complication free for the required duration of therapy⁵

In
93.2%

of patients, Introcan Safety[®] Deep Access dwelled between 1 and 10 days⁵



“ The Introcan Safety[®] Deep Access went in easily, quickly and was painless.

It was completely the opposite experience compared to previous cannulation when the staff took two hours to manage to insert a cannula that did not last long ”

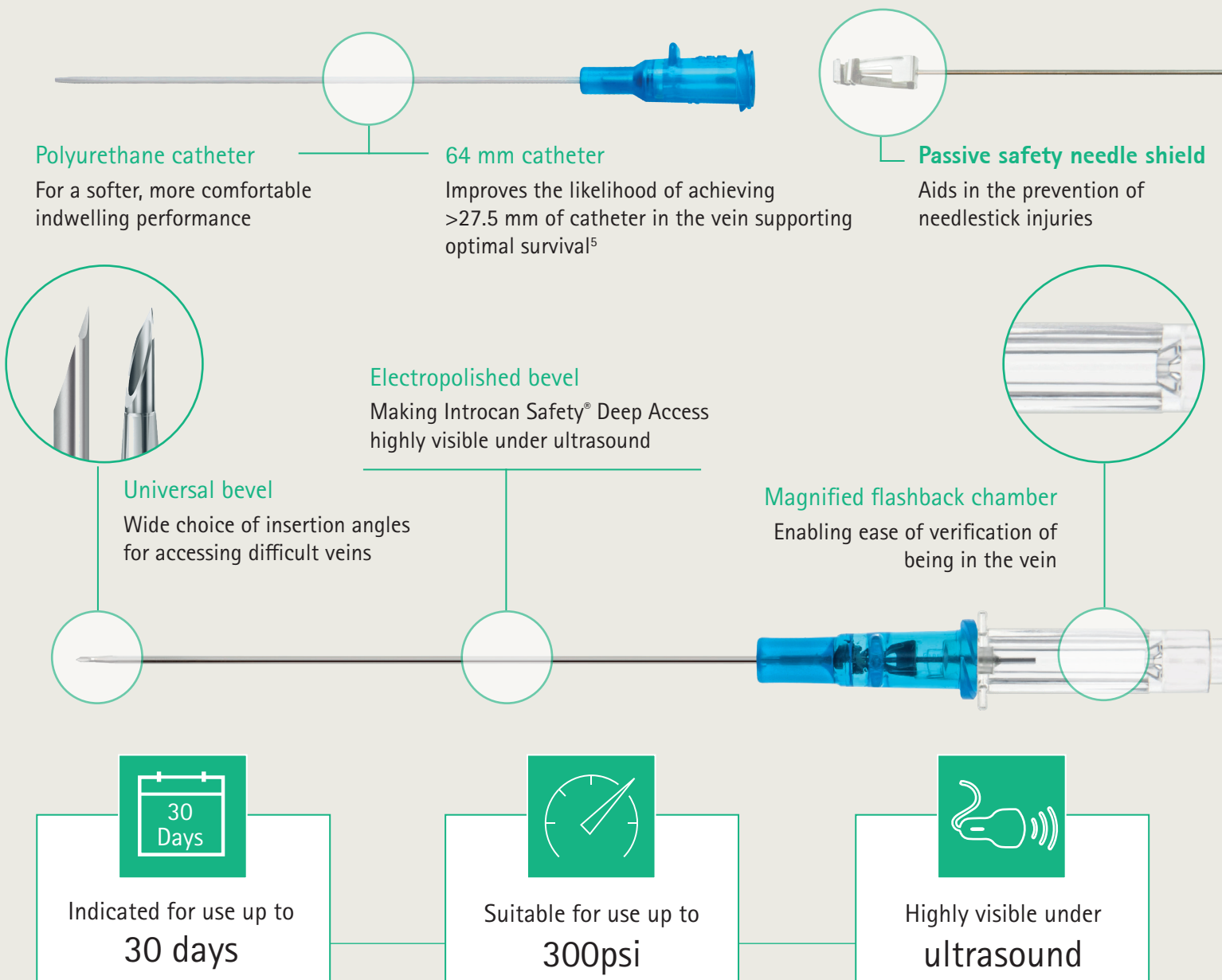
Patient experience with Introcan Safety[®] Deep Access

Scan the QR code and scroll through to read the latest scientific papers



Introcan Safety[®] Deep Access

Longer Length for Longer Dwell

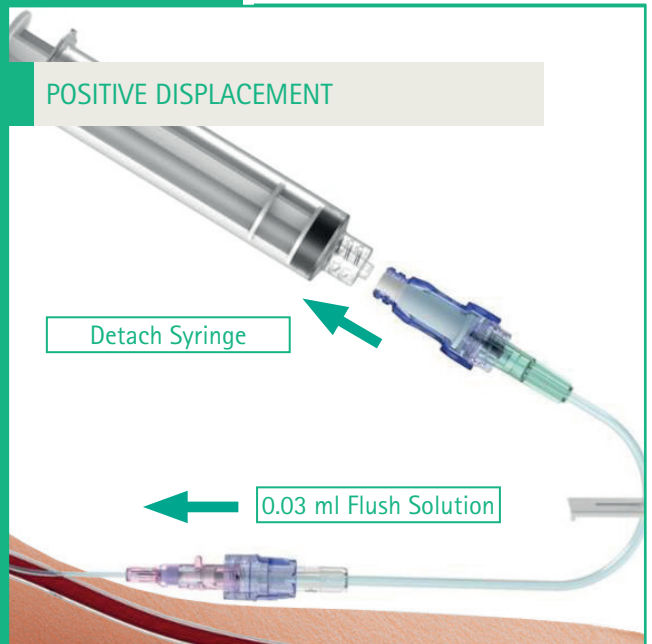


USG cannulation has been a 'game changer' in gaining access on some of our more challenging patients... patients have often waited hours for their vascular access and have subsequently missed doses of medications, thus having a tangible impact on their recovery and subsequent length of stay in hospital. Having had multiple failed cannulation attempts, patients are visibly relieved when I turn up with an ultrasound machine and the Introcan Safety[®] Deep Access.

Simon Tippler, Trigger Response Team⁵

Connect with Caresite®

Positive displacement technology delivers an automatic bolus of flush solution, upon disconnection of a flush syringe, helping to prevent blood reflux and promote catheter patency.



The smooth, flat access surface permits thorough and easy disinfection helping to prevent microbial ingress⁵.



The clear outer housing provides complete visibility of the fluid path allowing for easy inspection and confirmation of successful flushing.



The easy grip barrel is ergonomically designed to minimise finger slips and the risk of Key-Part touch contamination.

Clinical Support



When you choose to introduce Introcan Safety® Deep Access into your organisation, our dedicated team of Clinical Therapy Specialists will provide you with complimentary ongoing clinical education support, tailored to your requirements.

Ultrasound guided cannulation training

Our ultrasound guided cannulation training covers the following topics:

- Introduction to ultrasound
- Venous anatomy and physiology
- Vein assessment
- Device selection
- Hands on practice
- Aftercare

Transducer orientation

Ultrasound beam thickness is similar to the width of a credit card

Transducers will have a mark on one side that correlates with a mark on the screen

Check your orientation by applying ultrasound gel to transducer and touch it with your finger so that you can see your orientation

Catheter-to-vein-ratio

Select the vein or site that best accommodates the outer diameter and length of the peripheral IV catheter?

Appropriate size selection is important to ensure that adequate hemodilution is achievable?

An oversized catheter in a vein, with inappropriate hemodilution, can lead to complications such as phlebitis and infiltration?

Evidence suggests a catheter diameter should occupy no more than 33-45% of the lumen diameter of the target vessel?

Catheter Size	Vessel Size										Success Rate
	21 mm	2.5 mm	3 mm	3.5 mm	3.75 mm	3 mm	3.5 mm	4 mm	4.5 mm	5 mm	
21 mm											44-51%
2.5 mm											44-51%
3 mm											44-51%
3.5 mm											44-51%
3.75 mm											44-51%
3 mm											44-51%
3.5 mm											44-51%
4 mm											44-51%
4.5 mm											44-51%
5 mm											44-51%

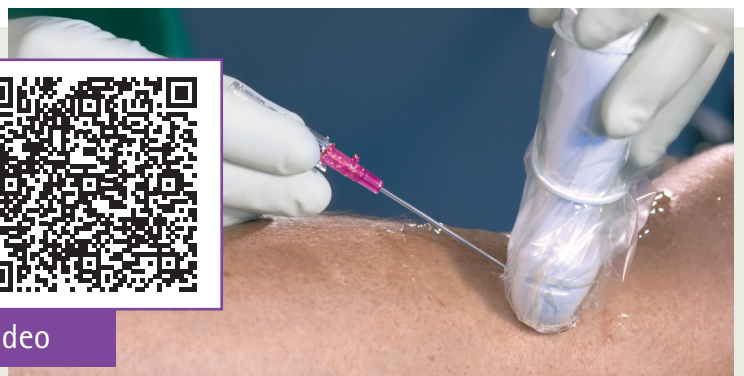
Long peripheral catheter 22G x 6.4 cm

Clinical demonstration video

Access is provided to our clinical demonstration videos showcasing ultrasound guided insertion of Introcan Safety® Deep Access in accordance with best practice guidelines and the principles of ANTT.





Scan the QR code and scroll through to watch the Introcan Safety® Deep Access demonstration video




Introcan Safety® Deep Access

Gauge size (G)	Length		Catheter ø (mm)	Gravity flow rate (ml/min)	Power injection flow rates		Units (per box)	Order code	NPC
	inch	mm			Contrast media viscosity at 20° mPa's	Flow rate (ml/sec)			
 18	2 ½	64	1.3	85	2.3 27.5	19 15	50	4251620-01	FSP4927
 20	2 ½	64	1.1	51	2.3 27.5	13 8	50	4251621-01	FSP4926
 22	2 ½	64	0.9	24	2.3 27.5	7 3	50	4251622-01	FSP4925
 24	1 ¼	32	0.7	17	2.3 27.5	5 2.5	50	4251623-01	FSP4924

Accessory items

Description	Length (cm)	Priming volume (ml)	Tubing inner ø (mm)	Power Injection	Latex free	DEHP free	Units (per box)	Order code	NPC
 Caresite® needlefree single extension	20	0.5	1.3	300 psi	✓	✓	100	470100-01	FSB1939
 Caresite® needlefree double extension	13	0.9	1.3	300 psi	✓	✓	100	470200-01	FSB2385

Ezcover® Ultrasound Probe Cover Sets

Description	Units (per box)	Order code
 15x61 cm ultrasound probe cover set with sterile gel sachet	30	PCG15061
15x122 cm ultrasound probe cover set with sterile gel sachet	30	PCG15122

References

1. Helm RE, Klausner JD, Klemperer JD, Flint LM, Huang E. Accepted but unacceptable: peripheral IV catheter failure. *J Infus Nurs.* 2015 May-Jun;38(3):189-203. doi: 10.1097/NAN.000000000000100. PMID: 25871866.
2. Lee Steere, Cheryl Ficara, Michael Davis, Nancy Moureau; Reaching One Peripheral Intravenous Catheter (PIVC) Per Patient Visit With Lean Multimodal Strategy: the PIV5Rights™ Bundle. *Journal of the Association for Vascular Access* 1 September 2019; 24 (3): 31-43. doi: <https://doi.org/10.2309/j.java.2019.003.004>
3. Piredda M, Fiorini J, Facchinetti G, Biagioli V, Marchetti A, Conti F, Iacorossi L, Giannarelli D, Matarese M, De Marinis MG. Risk factors for a difficult intravenous access: A multicentre study comparing nurses' beliefs to evidence. *J Clin Nurs.* 2019 Oct;28(19-20):3492-3504. doi: 10.1111/jocn.14941. Epub 2019 Jun 4. PMID: 31162862.
4. Data on file
5. Godfrey J and Gallipoli L, 2022 Introducing a long peripheral catheter to support improved outcomes for difficult intravenous access (DIVA) patients, presented at World Congress of Vascular Access