STEP 1. Ensure site is clean and dry. Aspirate the sheath, then withdraw sheath 2-3 cm.

STEP 2. Peel back adhesive backing of Safeguard Radial approximately halfway both sides and apply center of bulb (balloon) over arteriotomy site, where the sheath enters the artery. The arrows should be pointing in the direction of the head of the patient.

STEP 3. Remove remaining adhesive backing and secure firmly around wrist.

STEP 4. Securely attach syringe to tubing line marked “AIR”. Confirm that you are only injecting air into the device. Inflate bulb with maximum of 7 mL of air. Remove syringe.

STEP 5. Remove sheath. Confirm there is no bleeding. Confirm distal and proximal pulse. Ensure adequate perfusion is maintained. If necessary, adjust air volume in bulb until distal and proximal pulse is adequate. Air volume not to exceed 7 mL.

NOTE: The air volume and compression time required may differ according to patient’s condition, anticoagulant dosage, and size of puncture site.
**STEP 1. Suggested guidelines for DIAGNOSTIC PROCEDURE.**

a. Initial compression should be maintained for a minimum of 30-45 minutes.

b. Attach and completely engage syringe to tubing line.

c. Remove 1-2 mL of air.

d. Check for bleeding. If bleeding is observed, add air not to exceed the maximum 7 mL volume.

e. Repeat every 15-30 minutes until bulb is completely deflated and hemostasis has been achieved.

f. When completely deflating balloon do not pull more than 7 mL (do not pull negative pressure).

**STEP 2. Suggested guidelines for INTERVENTIONAL PROCEDURE.**

a. Initial compression should be maintained for a minimum of 60-90 minutes.

b. Attach and completely engage syringe to tubing line.

c. Remove 1-2 mL of air.

d. Check for bleeding. If bleeding is observed, add air not to exceed the maximum 7 mL volume.

e. Repeat every 15-30 minutes until bulb is completely deflated and hemostasis has been achieved.

f. When completely deflating balloon do not pull more than 7 mL (do not pull negative pressure).

**STEP 2. Confirm hemostasis has been achieved. Carefully remove device and apply sterile dressing per hospital protocol.**