PRODUCT DESCRIPTION
The Luer Adapter is designed for use with the Aspira® Drainage Catheter. It connects to the valve and enables connection of the Aspira Drainage Catheter to a drainage system.

INDICATIONS FOR USE
The Luer Adapter is intended to provide access to the Aspira Drainage Catheter. It is used to drain fluid using standard wall suction, water seal drainage system, glass vacuum bottle, syringe or other appropriate method.

CONTRAINDICATIONS
None known when used with the Aspira Drainage Valve Assembly.

WARNINGS
• For single patient use only. Do not reuse, reprocess or resterilize. Reuse, reprocessing or resterilization may compromise the structural integrity of the device and/or lead to device failure, which, in turn, may result in patient injury, illness or death. Use only the Luer Adapter to access the catheter with a wall suction unit, water seal drainage system, glass vacuum bottle, syringe or other appropriate device.
• Attach the Luer Adapter to the Drainage Line syringe prior to attaching it to the catheter.
• Do not use excessive force on the valve or catheter. Excessive force or incorrect use may damage the device, or cause accidental catheter dislodgement.
• Do not access the catheter valve with anything other than Aspira Drainage System approved devices.
• Accessing the catheter valve with anything other than Aspira Drainage System approved devices may damage the valve.
• Dispose of used product in accordance with accepted medical practice and applicable local, state and federal regulations. Used product may present a potential biohazard.

PRECAUTIONS
• Caution - Federal Law (USA) restricts this device to sale by or on the order of a physician.
• Use only the Luer Adapter to access the catheter with a wall suction unit, water seal drainage system, glass vacuum bottle, syringe or other appropriate device.

POTENTIAL COMPLICATIONS
Pleural and Peritoneal fluid drainage may result in any of the following complications:
- Accidental catheter dislodgement, breakage or removal
- Exposure to bodily fluids
- Hypotension subsequent to drainage
- Infection
- Leakage
- Low flow rate/prolonged drainage
- Occlusion
- Pain during fluid removal
- Skin irritation or infection

PLEURAL COMPLICATIONS
- Re-expansion pulmonary edema

PERITONEAL COMPLICATIONS
- Electrolyte imbalance
- Loculation of peritoneal cavity
- Peritonitis
- Protein depletion

USE INSTRUCTIONS
NOTE: Before beginning this procedure, read the “Contraindications”, “WARNINGS”, “Precautions” and “Potential Complications” sections of these instructions for use.

DRAINAGE PROCEDURE
USING A SYRINGE
1. Connect the supplied Luer Adapter to the syringe. (Figure 1)
2. Push the Luer Adapter and syringe onto the catheter until you hear or feel a click. Tug gently to make sure the connection is secure. (Figure 2)
3. Pull back the syringe plunger to draw fluid.
4. When drainage is complete, disconnect the Luer Adapter and syringe by squeezing the wings on the Luer Adapter and gently pulling to separate it from the catheter valve. (Figure 3)
5. Wipe the catheter valve with a new alcohol pad. Place the new valve protector cap over the catheter valve.

NOTE: If necessary to repeat procedure, disconnect Luer Adapter from the catheter valve between drainages.

Using a Wall Suction Unit:
1. Connect the Luer Adapter to the wall suction line, and activate the pinch clamp.
2. Push the Luer Adapter and suction line onto the catheter until you hear or feel a click. Tug gently to ensure the connection is secure. Open the pinch clamp.
3. Initiate drainage.
4. When ready to disconnect wall suction, pinch the wings on the Luer Adapter and gently pulling to separate it from the catheter valve. (Figure 3)
5. Wipe the catheter valve with a new alcohol pad. Place the new valve protector cap over the catheter valve.

NOTE: Continuous or intermittent wall suction is acceptable.

WARNING: Attach the Luer Adapter to the syringe or wall suction line prior to attaching it to the catheter.

CAUTION: Use only the Luer Adapter to access the catheter with a wall suction unit, water seal drainage system, glass vacuum bottle, syringe or other appropriate method.

Occluded or Partially Occluded Catheters
Catheters that present resistance to flushing and aspiration may be partially or completely occluded. Do not flush against resistance. Do not flush with a syringe smaller than 10 mL. If the lumen will neither flush nor aspirate, and it has been determined that the catheter is occluded, a declotting procedure may be followed per institution protocol.