

Three Point Securement Recommendations Using The Ritus™ fistula cannula with anti-reflux valve (RFC)

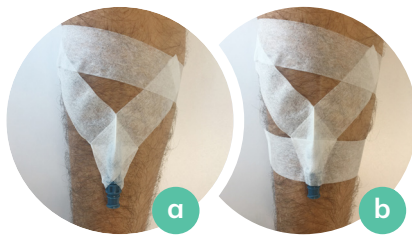


1

Tape to RFC

Purpose is to maximise the contact area of the RFC cone.

- Use wide tape.
- Use chevron style taping first.
- Smooth tape with fingers around the RFC cone to enhance contact area.
- Do not cover luer thread with tape.

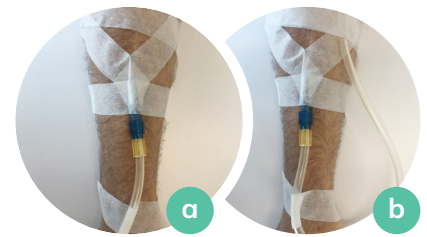


2

Tape to Skin

Purpose is to optimise contact area of the tape to the patient's skin.

- Patient's skin should be clean and dry.
 - Consider skin preparation if adhesion is compromised e.g. oily, sweaty, or hairy.
 - Maximise adhesion area by using wide tape.
- a) Reinforce both ends of the chevron using additional tape.
- b) Place a second strip of tape across RFC cone, moulding tape to cone.



3

Tape to Bloodline

Purpose is to secure the bloodline to prevent strain on the RFC.

- a) Secure bloodline within 5-10 cm of RFC.
- b) Secondary bloodline securement to patients arm ensuring enough slack to allow the patient to straighten their arm.



Upper arm access may present additional securement challenges when compared to forearm access, regardless of the type of needle used.

Additional precautions should be taken when securing the RFC under these circumstances.