

Dialog^{+®} Hemodialysis System Clotted Dialyzer Quick Reference Guide Option #2

(with scissor clamps)

1. Press



to put in bypass.

- 2. Reinfuse blood if possible.
- 3. Disconnect arterial and venous lines from patient access.
- 4. Remove clotted system. Return couplings to rinse bridge. You will get an instant SAD alarm when you remove the venous line from the SAD (Safety Air Detector). The alarm will disable the blood pump. Mute the alarm and proceed with priming and stringing the new lines by joining the arterial and venous patient ends together using a sterile recirculator, occlude both the arterial and venous dialyzer ends using reusable scissor clamps. Clamp the venous pressure monitor line.
- 5. Spike the saline. Unclamp scissor clamp on the dialyzer end of the arterial blood line and allow to gravity fill. Re-clamp. Unclamp scissor clamp on the dialyzer end of the venous blood line and allow to gravity fill inverting the venous drip chamber to fill. Re-clamp.
- 6. Place the lines in their appropriate positions on the machine without connecting to the dialyzer. Entire line should be primed. Attach arterial and venous pressure monitoring lines leaving venous pressure monitor line clamped. Connect the dialyzer end of the arterial blood line to the dialyzer. Unclamp scissor clamp on arterial bloodline. Place dialyzer in holder arterial end down.
- 7. Start the blood pump and increase pump to appropriate speed until the dialyzer is filled with saline.
- 8. Stop the blood pump and attach the venous blood line to the dialyzer. Remove scissor clamp from venous blood line. Unclamp the venous monitor line.
- 9. Connect dialysate couplings to dialyzer tilting the arterial end up. Take out of bypass to fill dialysate side of dialyzer.
- 10. Return dialyzer to holder blue end up.
- 11. Ensure blood lines are free of kinks and properly primed.
- 12. Connect lines to patient access per facility protocol.
- 13. Clamp Saline, and then restart the blood pump.
- 14. Inspect all related pressure values and document in accordance to unit protocol.

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