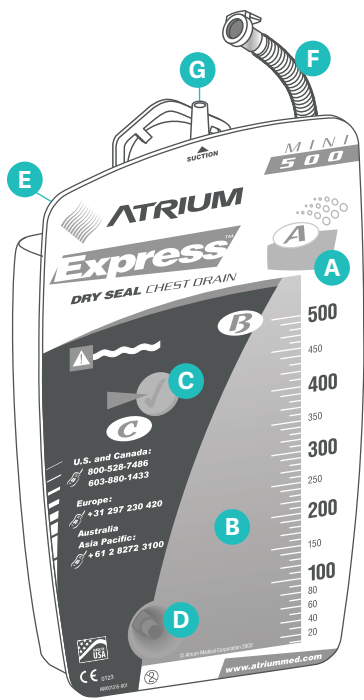




# Atrium Express Mini 500

## Dry Seal Chest Drain

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- A** Air Leak Window
- B** Collection Chamber
- C** Vacuum Indicator
- D** Needleless Luer Port
- E** Positive Pressure Release Valve
- F** Patient Tube
- G** Suction Port

## Description

- The Atrium Express Mini 500 Dry Seal Chest Drain is a disposable, waterless operating system with 500 ml collection volume, a non-adjustable dry suction regulator preset at -20 cmH<sub>2</sub>O, and a dry one-way valve for seal protection.

## Set up

- **Step 1 – Select catheter adapter**  
Select appropriate adapter and secure firmly into distal end of patient tube.
- **Step 2 – Connect patient tube to patient**  
Close patient tube clamp prior to connecting patient tube to catheter. Insert connector firmly into catheter.
- **Step 3 – Connect patient tube to chest drain**  
Remove red disposal cap. Connect patient tube to chest drain.
- **Step 4 – Open patient tube clamp**  
Clamp must remain open at all times when system is connected to patient. Open clamp prior to initiating suction.
- **Step 5 – Connecting to suction**  
When suction is prescribed by the physician, firmly attach suction line to suction port. Slowly increase suction source vacuum to -80 mmHg or higher. The suction control regulator is preset to -20 cmH<sub>2</sub>O.

## What to check during system operation

### • Placement of unit

During patient ambulation or when patient is confined to bedrest, always place unit below patient's chest in upright position. Use hanger provided for bed rail attachment. Only use belt straps as directed for patient ambulation.

### • Suction port

When suction is required, firmly attach the suction source line to the suction port located on the top of chest drain.

### • Suction source

Suction source should provide a minimum vacuum pressure of -80 mmHg at > 38 l/min of airflow per minute.

### • Fixed suction regulator

The non-adjustable dry suction regulator is preset at -20 cmH<sub>2</sub>O vacuum setting and will automatically compensate for moderate changes in vacuum source pressure.

### • Dry one-way seal valve

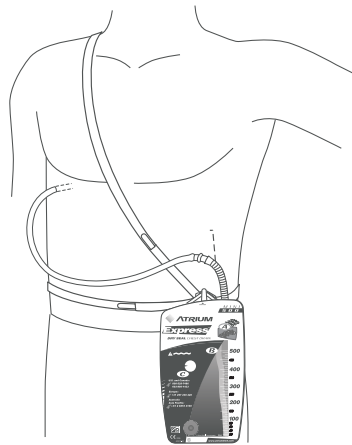
The dry seal valve does not require water for seal protection during patient use. The one-way dry seal valve is not position sensitive.

### • Vacuum indicator

A ✓ mark symbol is visible in the vacuum indicator window when vacuum is present inside the chest drain. When no vacuum is present inside chest drain, the ✓ mark symbol will not appear.

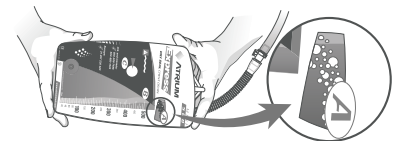
### • Collection chamber

The collection chamber is graduated in 10 ml increments up to a maximum capacity of 500 ml.



### • Air leak detection

Fluid must be present in the collection chamber for air leak detection. If fluid is not present, add 20 ml of sterile water or saline through the needleless Luer port located on the front of the drain. Temporarily tip the drain to the right as shown until collection fluid appears in the air leak window (A). Bubbling in the air leak window (A) when positioned as shown, will confirm a patient air leak. Immediately return chest drain to upright position.



### • Automatic high negativity release

The high negativity release valve located on the back wall of the chest drain automatically activates to limit maximum vacuum pressure.

### • Positive pressure release valve (PPRV)

PPRV located on top of the chest drain opens to release positive pressure automatically.

### • Sampling patient drainage

Sampling patient drainage must be in accordance with approved hospital infection control standards. Fluid samples can be taken directly from the needleless Luer port located on the front of the drain or from the patient tube by forming a temporary dependent loop and inserting a 20 gauge needle at an oblique angle. Do not puncture patient tube with an 18 gauge or larger needle.

### • System disconnection

Clamp off all indwelling thoracic catheters prior to disconnecting chest drain from patient. Following patient line removal from chest drain, insert the blunt end of the red disposal cap into the patient line port to close off the collection chamber for disposal.

### • System disposal

Disposal of chest drain and its contents should be in accordance with all applicable regulations.

## Frequently asked questions

### Is the Express Mini position sensitive?

The dry seal valve is not position sensitive during operation. However, fluids do have the potential to leak out of the top of the drain if it is tipped at a severe angle. Therefore, whether the patient is ambulating or confined to bedrest, it is recommended to always maintain the unit below the patient's chest in an upright position.

### Can suction be applied to the drain?

Yes. At the physician's discretion, the Express Mini can be connected to suction. After attaching the suction line to the suction port, increase the suction source vacuum to -80 mmHg or higher. The non-adjustable dry suction regulator is preset to -20 cmH<sub>2</sub>O.

### Do I need to add water to the drain?

No. The Express Mini does not require water to operate. However, fluid must be present in the drain to check for an air leak. If fluid is not present, you can add 20 ml

of sterile water or saline through the needleless Luer port on the front of the drain. Follow the instructions on how to check for an air leak.

### What does the ✓ mean?

When the ✓ appears it means vacuum is present inside the chest drain. When no vacuum is present inside the chest drain, such as when the patient has an air leak on gravity drainage, the ✓ will not appear. The ✓ may appear intermittently with respiration.

### What should I do when the drain fills?

The Express Mini can be replaced with a new one. An in-line connector and removable clamp are provided to make change out easy.

Have a question or need help in a hurry? Call Getinge toll free at 1-800-528-7486.

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