



General

What IV locations are good candidates for monitoring?

Sensitivity is greatest when the IV is placed in a shallow vein. Sensitivity is decreased if the catheter is placed below the fascia. Placing the receptacle directly on the wrist and ankle should be avoided as these are areas with a lot of movement that could cause the receptacle to loosen or fall off.

What type of fluids should the ivWatch device be used with?

The Model 400 is indicated for use with optically clear infusates.

How long will the monitor's battery last before running out?

A full charge of the monitor's battery will last for at least 5 hours when disconnected from a power source.

How should I clean the monitor and sensor cables?

Clean the monitor, power supply, and sensor cable with hospital grade disinfectant wipes. Allow to air dry.

The following agents have been tested and can be used to safely clean the patient monitor, power supply, and sensor cable without damaging equipment.

| Agents | Patient Monitor | Power Supply | Sensor Cable |
|--------------------------------|-----------------|--------------|--------------|
| 1% Sodium hypochlorite bleach | ✓* | ✓* | ✓ |
| 70% Isopropyl alcohol solution | ✓ | ✓ | ✓ |
| 1.4% Hydrogen peroxide | | ✓ | ✓ |

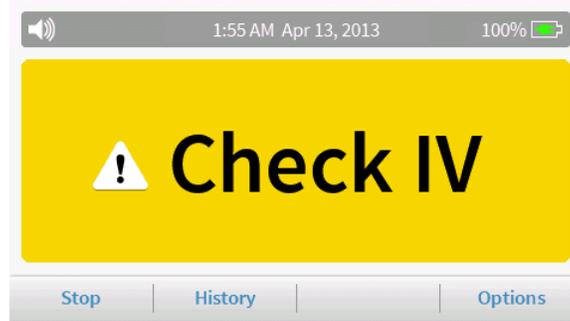
* Bleach may cause corrosion of the USB, serial port, and power socket of the patient monitor. It may also cause corrosion to the power supply connector, which attaches to the monitor. These components can be cleaned with 70% Isopropyl alcohol solution.

Notifications

Why does the monitor keep displaying a notification even though I do not see any signs of an infiltration?

The ivWatch Model 400 is able to detect infiltrations in very small volumes, before there would be any visual or physical signs of an infiltration. Make sure to check all connections and the security of the sensor receptacle. If a yellow or red notification has occurred, the patient's IV should be checked more often.

What should I do if a yellow Check IV notification has been issued?

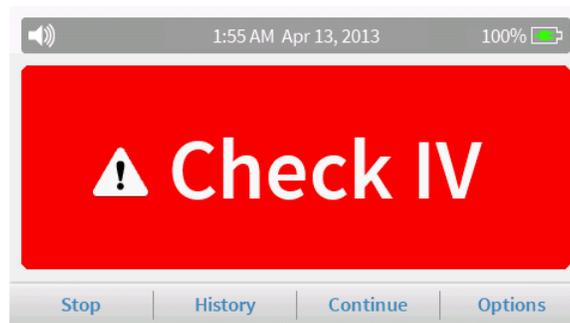


A yellow Check IV notification indicates a possible infiltration. You should follow your facility's protocol for assessing the IV site. You can silence the audible notification for 2 minutes by pressing the "Mute" button on the top right of the patient monitor. Pressing the "IV Check" button on the monitor will also silence the alarm for 1 hour and will display a yellow "Monitoring" screen if conditions still indicate a possible infiltration.

Verify that there are no kinks, bends, or breaks in the sensor cable and that the patient is not lying on the cable or receptacle. Also check the cable connections, and that the receptacle is securely adhered on the patient. If the monitoring state has returned to normal, the status will change from the yellow "Monitoring" screen to the blue "Monitoring" screen.

The ivWatch Model 400 is able to detect infiltrations in very small volumes, before there would be any visual or physical signs of an infiltration. If the yellow "Monitoring" screen continues, it is suggested that the IV site be assessed more frequently.

What should I do if a red Check IV notification has been issued?



A red Check IV notification indicates a probable infiltration. You should follow your facility's protocol for assessing the IV site. You can silence the audible notification for 2 minutes by pressing the "Mute" button. Press the "IV Check" button and select either "IV OK" or "IV Not OK" as appropriate. As the ivWatch monitor has indicated a probable infiltration, it will continue to provide an audible notification every 2 minutes until the red Check IV state is dismissed.

Verify that there are no kinks, bends, or breaks in the sensor cable and that the patient is not lying on the cable or receptacle. Also check the cable connections, and that the receptacle is securely adhered on the patient.

Select "Stop" if an infiltration/extravasation is identified, or "Continue" to resume monitoring the same IV site. If the monitoring run is continued the header bar will change to a red color and show the time of the last red Check IV, however, the monitor

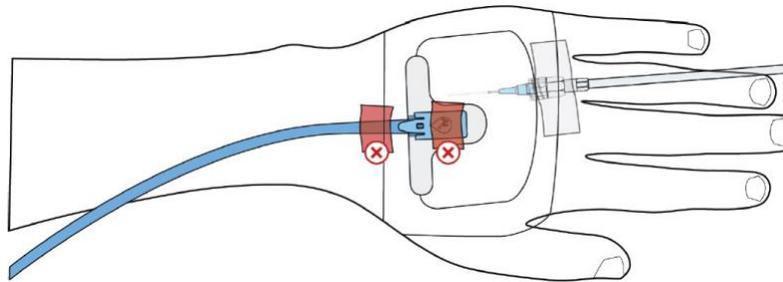
will need to establish a new baseline reading. If an infiltration is present, the baseline will be taken from infiltrated tissue. Thus, it may take longer for the device to issue a new notification depending on the rate of the infusion and the extent of the infiltration.

The ivWatch Model 400 is able to detect infiltrations in very small volumes, before there would be any visual or physical signs of an infiltration. If there is a red Check IV notification and monitoring is continued, it is suggested that the IV site be assessed more frequently.

Sensor Cable

How do I tape the sensor cable to a patient?

Secure the sensor cable, ensuring that the cable is not kinked or compressed. Recommended locations to avoid in securing the cable are indicated in the illustration below. Placing tape on these locations could reduce the monitor's sensitivity or potentially cause false notifications by lifting the sensor from the skin over time. It may be helpful to place a piece of gauze behind the sensor for extremely active patients, or when the sensor is placed on or near an area of flexion.



How do I remove the sensor cable from the monitor?

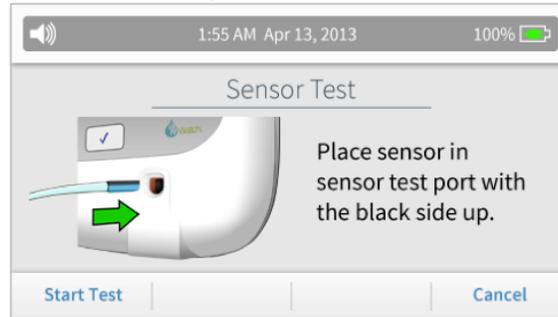
Grasp both sides of strain relief and pinch along the bottom of the monitor, or gently rock side-to-side. Do not forcibly remove by pulling the strain relief at an angle, or tugging on the blue portion of the cable.



How do I test the quality of a sensor cable?

The monitor has a test port located on the front that can be used to test the condition of the sensor cable. With the sensor head inserted with the flat, black side up, you can then run a Sensor Test to determine if the sensor is functioning normally or not. See our [Troubleshooting](#) guide for additional details around performing a sensor test.

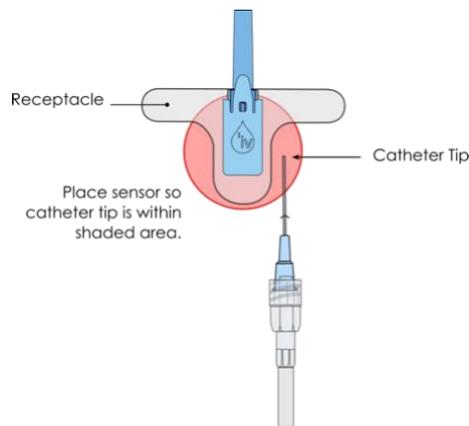
When starting a monitoring run at a new IV site, the device will automatically require a sensor test and will prompt you to do so.



Receptacle

How far from the IV catheter can I place the sensor?

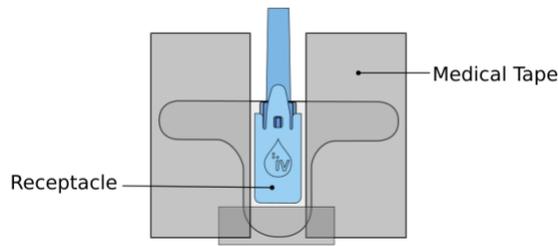
Preferably, the receptacle should be placed next to the tip of the catheter. We advise placing the receptacle no further than an inch from the insertion site, but it will still work if placed further away. However, the further the receptacle is from the catheter, the larger the infiltration volume required to trigger a notification.



How can I keep the sensor receptacle from becoming loose or falling off?

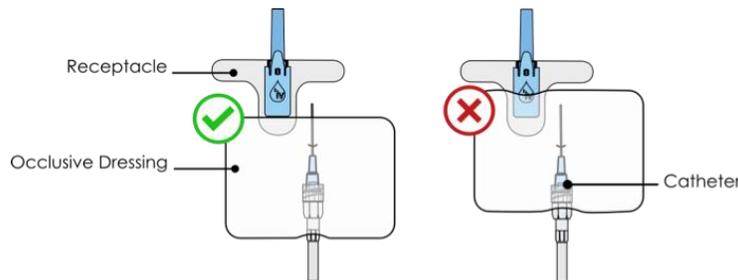
Medical tape or tegaderm can be placed over the side wings and along the nose of the sensor receptacle. The tape or dressing should be placed before a receptacle has loosened or fallen off, but if the receptacle has begun to de-adhere, it can be added to reinforce the affected areas.

For situations when a patient is sweating at the placement site, the area can be wiped down with an alcohol wipe and prepared with a barrier film, such as Cavilon, before placing the receptacle on the patient.



How should I place the IV dressing over the sensor receptacle?

Cover the insertion site with an occlusive dressing according to facility protocols. The occlusive dressing should not be placed over the blue portion of the ivWatch receptacle.

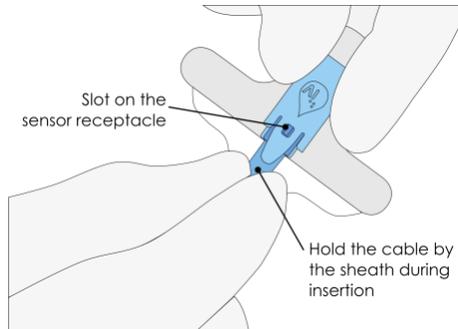


Can I place the sensor receptacle over the IV dressing?

Yes, the sensor will still work if placed over the IV dressing. Ensure that the sensor has a clear line of sight to the skin. Thus, the sensor should be placed only over clear portions of the dressing. Avoid the white border of the dressing.

When should I insert and remove the sensor head from the sensor receptacle?

To avoid damaging the sensor cable, the sensor head should be placed in the receptacle prior to placing it on the patient. Hold the cable as close to the sensor head as possible as you insert the cable into the receptacle. You should hear an audible click when the bump on the sensor head is completely entered into the receptacle notch. When removing the sensor from a patient, pull up on the blue tab of the receptacle to slide the sensor head out, again holding the sensor cable as close to the sensor head as possible. You may leave the receptacle on the patient for future use or remove it if no longer monitoring an IV site.



What can I do to make the sensor receptacle come off the patient more easily?

Alcohol wipes or adhesive remover can be used on and around the area of the receptacle to weaken the adhesive.

Can I reuse a receptacle?

No. The adhesive of the receptacle is designed for a single use. The receptacle needs to be replaced even if the receptacle is pulled off to reposition it on the same patient. It is crucial to replace receptacles that have become loose or were removed as the sensor requires adhesion close to the surface of the skin to perform continuous monitoring.