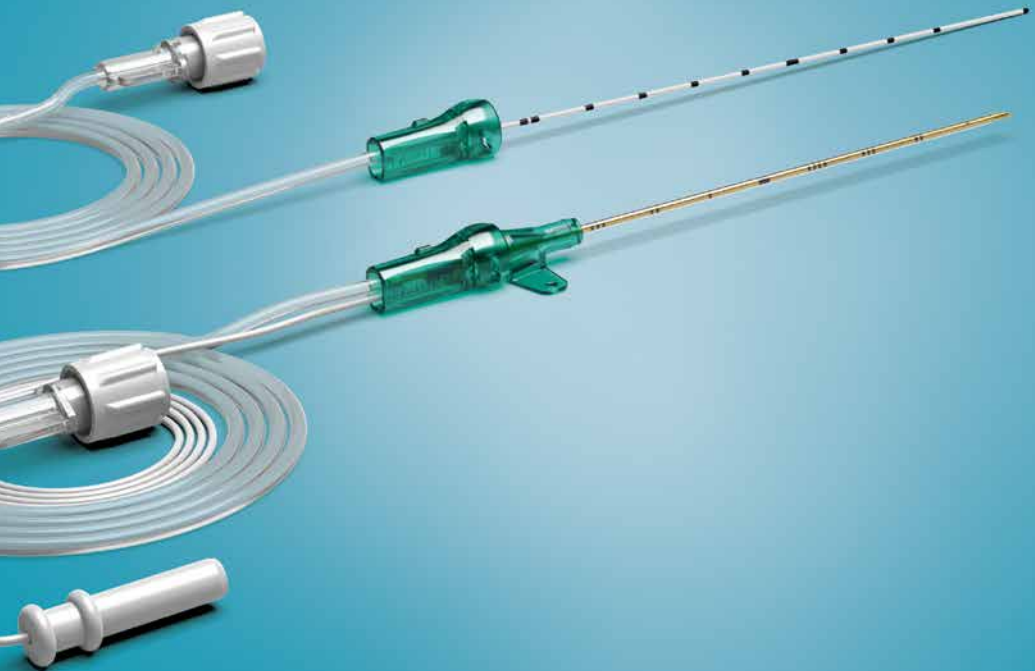


E-Cath[®] II / E-Cath[®] II Plus

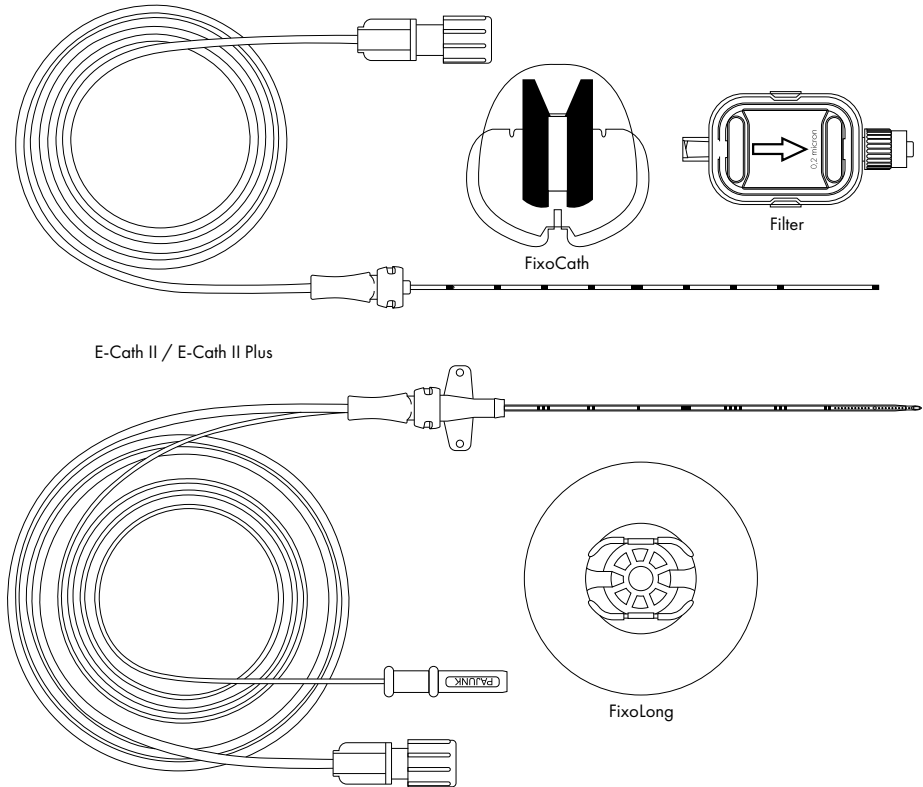
Procedure Guide



E-Cath II

The E-Cath®/E-Cath® Plus system was developed in collaboration with Dr Ban Tsui. It makes the Catheter Over Needle (CON) Technique as convincingly simple as the Single Shot Technique. The CON Technique can offer great added value, especially for the training of young anesthetists and for hospitals that do not work with continuous nerve blocks on a daily basis.

The new E-Cath II/E-Cath II Plus combines the best of clinical experience and the latest technical expertise.

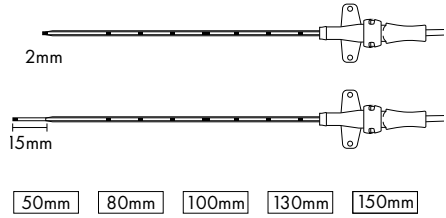


The E-Cath II / E-Cath II Plus can be combined with either a FixoLong and a Filter or a FixoCath.

1 Select your E-Cath

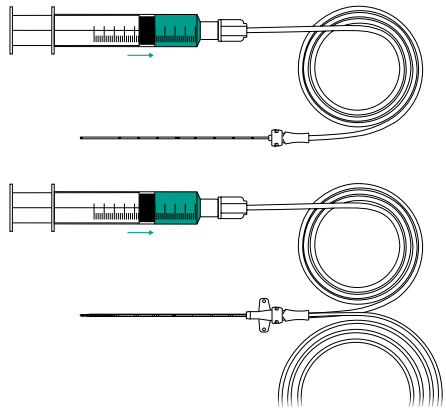
Choose a length appropriate to the site and the patient. The E-Cath II is available in 18G x 50mm, 80mm, 100mm, 130mm and 150mm lengths. The E-Cath II Plus is available in 18G x 50mm, 80mm, 100mm lengths.

Consider the length of the needle track to the target. It is ok if some of the indwelling catheter is exposed or the green hub is not at skin level. For fascial plane blocks the length selected is not critical as long as the catheter is not too short. The E-Cath II protrudes 2mm from the indwelling catheter and the E-Cath II Plus protrudes 15mm.



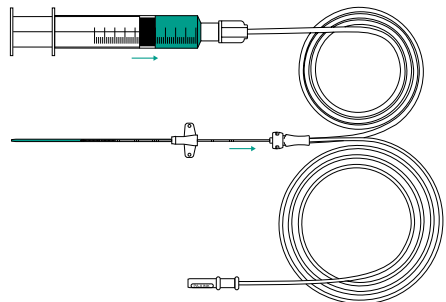
2 Prepare the kit

Flush both lines and leave syringes attached for ultrasound location purposes. Shown here is normal saline used on the needle to locate and adjust the final position, with the local anaesthetic reserved for the E-Cath so that the total effect of the regional anaesthetic block is via the E-Cath. If you use nerve stimulation as part of your catheter technique you may choose to use 5% dextrose in place of the saline.



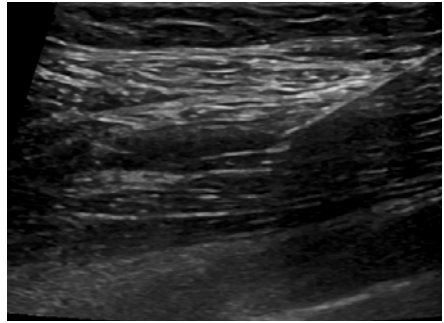
3 Flush the needle / indwelling catheter

In order to completely flush air from between the two components of the needle / indwelling catheter you can withdraw the needle as shown here and flush and reinsert the needle. Removing the air improves the echogenicity of the needle. To separate the two parts rotate the hub of the needle a quarter turn to the left, rotate the hub of the needle a quarter turn to the right to reattach the needle prior to performing the block.



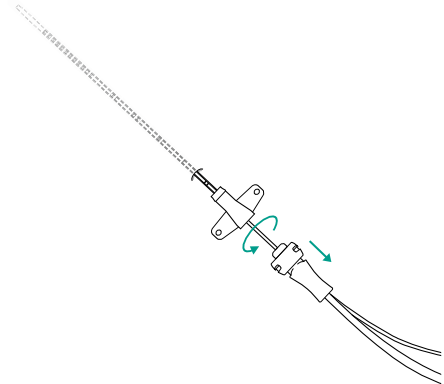
4 Insert the needle under ultrasound control

The SonoPlex needle incorporates Pajunk's Cornerstone Reflector technology over the distal 20mm, so is echogenic. Place the needle at the selected site and confirm injectate spread with your saline flush, adjusting position as necessary. For fascial plane blocks you can feed the needle in at this stage as the tissue plane opens up. The final position should be achieved before removing the needle. Ideally, the hub will lie flush against the skin at the needle entry point; this will make securing easier.



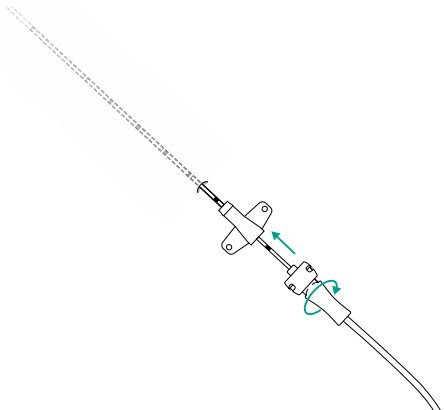
5 Remove the needle

Simply rotate the hub of the needle a quarter turn to the left and slide the needle out of the indwelling catheter. The empty indwelling catheter is still visible on ultrasound.



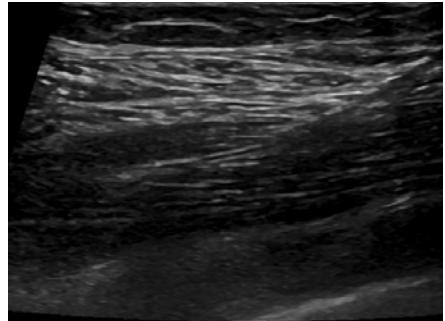
6 Insert the E-Cath

Without moving the indwelling catheter, insert the E-Cath with its integrated infusion line and syringe of local anaesthetic. Connect and lock the E-Cath to the indwelling catheter. There is no catheter threading involved, the catheter tip will be where you left the tip of the needle / indwelling catheter. The E-Cath II will protrude 2mm and the E-Cath II Plus will protrude 15mm.



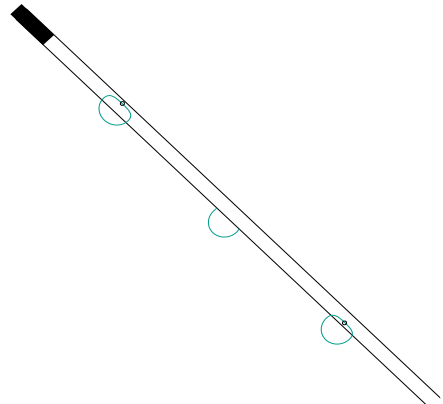
7 Check the catheter position

The E-Cath / indwelling catheter combination is clearly visible on ultrasound. Hold the hub of the indwelling catheter in place as you inject under ultrasound vision to confirm correct spread of local anaesthetic. Because the catheter position is predictable this technique can be used when troubleshooting a previously-inserted E-Cath which might be suspected of catheter migration. The E-Cath II Plus has an integrated stainless steel reinforcement designed to facilitate placement of the E-Cath.



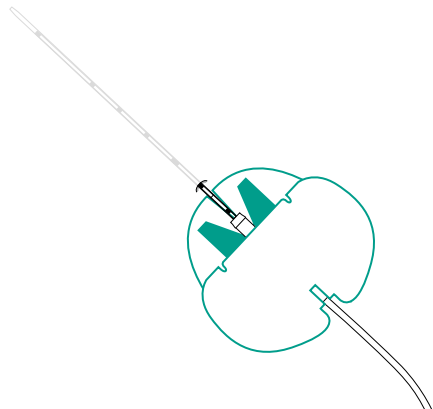
8 Local anaesthetic infusion

Flush and connect the filter to the end of the infusion line and attach to the infusion pump of your choice. Local anaesthetic is released from the catheter via three lateral openings on the E-Cath II Plus as shown here. The E-Cath II has a distal opening.



9 Secure the E-Cath

Similar to an intravenous catheter, the E-Cath II hub is designed to make securing the catheter much easier. The Pajunk FixoCath intends to provide security against traction on the infusion line while maintaining visibility of the injection site for daily review. The whole area can then be covered with a transparent dressing and the filter attached to the included FixoLong filter holder. Alternatively, the hub includes suture holes.



QR-Codes



Product Page



Video



eIFU Portal LUER



eIFU Portal NRFit

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