



## **QuikClot®**

# Interventional® and Radial®

### Usage Guide: QuikClot® Interventional® and Radial®

#### **QuikClot Interventional Hemostatic Pad**

QuikClot Interventional is a soft, white, nonwoven, hydrophilic pad impregnated with kaolin, an inorganic mineral that is both safe and effective in accelerating the body's natural clotting cascade without any exothermic reactions or use of animal or human proteins.

Each QuikClot Interventional is packaged in a foil pouch for aseptic removal and is packed 10 per box.

#### QuikClot Interventional is available for use in two easy to use formats:

- QuikClot Interventional Hemostatic Pad
- QuikClot Interventional Hemostatic Pad Pre-Slit (hemostatic pad is pre-slit to easily fit around catheters, tubes or introducer sheaths where bleeding or oozing is a problem)

#### **Instructions For Use**

#### **QuikClot Interventional Hemostatic Pad**



STEP 1: Remove hemostatic pad from packaging and place pad into sterile field, using aseptic technique. Do not wet the pad with saline before using it.



Place the hemostatic pad on the puncture site. Apply manual compression on the pad for at least 5 minutes or until bleeding stops.

Note: Arterial punctures using large dilators will require longer manual compression time. Following placement of the hemostatic pad, health care professionals are encouraged to continue to use the standard of care at their institution regarding site care, time to ambulation and time to patient discharge.



Without moving or lifting the pad, apply Tegaderm adhesive bandage or equivalent over pad while maintaining manual compression on the pad. Secure adhesive bandage to skin.



The hemostatic pad should be changed every 24 hours or more often, if required. To change bandage, gently peel away adhesive bandage and gently remove pad.

#### QuikClot Radial Hemostatic Roll

QuikClot Radial is a soft, white, nonwoven, hydrophilic roll and a unique direct pressure adhesive bandage. The roll is impregnated with kaolin, an inorganic mineral that is both safe and effective in accelerating the body's natural clotting cascade without any exothermic reactions or use of animal or human proteins.

The direct pressure adhesive bandage holds the roll dressing in place in order to maintain constant downward pressure to provide compression.

Each QuikClot Radial roll is packaged in a foil pouch for aseptic removal and is packed 10 per box.

#### Interventional and Radial Indications:

- FDA/CE cleared for the local management and control of surface bleeding from vascular access sites, percutaneous catheters or tubes utilizing introducer sheaths up to 12 Fr.
- FDA/CE cleared for patients on drug-induced anticoagulation treatment for up to 7 Fr.

#### QuikClot Interventional Hemostatic Pad Pre-Slit

STEP 2:



STEP 1: Remove hemostatic pad from packaging and place pad into sterile field using aseptic technique. Do not wet the pad with saline before using it.



Place the hemostatic pad around percutaneous catheters, tubes, ports or access lines. Apply firm, non-occlusive manual compression on the pad for at least 5 minutes or until bleeding/oozing stops.

Note: Arterial punctures using large dilators will require longer manual compression time. Following placement of the hemostatic pad, health care professionals are encouraged to continue to use the standard of care at their institution regarding site care, time to ambulation and time to patient discharge.



STEP 3:
Without moving or lifting the pad, apply a Tegaderm adhesive bandage or equivalent over the pad and percutaneous catheters, tubes, ports or access lines while maintaining manual compression on the pad. Secure the adhesive bandage to skin.



STEP 4:
The hemostatic pad should be changed every 24 hours or more often, if required. To change bandage, gently peel away adhesive bandage and gently remove pad. Attention should be paid not to remove or displace percutaneous catheters, tubes, ports or access lines.

#### **QuikClot Radial Hemostatic Dressing**



#### STEP 1:

Remove hemostatic roll from package. Place roll into sterile field using aseptic technique. Do not wet the roll with saline before using it.



#### STEP 2:

Place the roll on the puncture site. Apply manual compression on the roll while the adhesive bandage or equivalent is prepared for application and especially while the introducer is removed.

Note: Arterial punctures using large dilators will require longer manual compression time. To maintain manual compression on the roll, Steps 3 and 4 may require assistance from a second health care provider.



#### STEP 3:

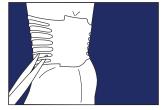
Remove the adhesive bandage from package. Grasp the two edges of the bandage and pull to break the release liner. Remove release liner from bandage.





#### STEP 4: DO NOT MOVE OR LIFT

THE ROLL. Center the adhesive bandage over the roll. Maintain manual compression on the roll. Stretch bandage around wrist until the adhesive edges overlap, adhering the tan colored tab to the patient's skin and overlapping the white tab to adhere on top of the tan tab.



#### STEP 5:

The adhesive bandage should be left in place for at least 30 minutes. Compression on the roll should then be gradually released by cutting every other elastic band on both sides over the next 30 minutes.



#### STEP 6:

The adhesive bandage's pressure should be completely released at one hour after application. To complete the pressure release, cut all the remaining elastic bands.



#### STEP 7:

The hemostatic roll may be left in place for up to 24 hours.

NOTE: Health care providers are encouraged to continue to use the standard of care at their Institution. The standard of care includes manual compression at the puncture site, time to ambulation, and time to patient discharge.



