NEONATAL
PORTFOLIO

SERVING CANADIAN HEALTHCARE WORKERS SINCE 1992

PRODUCT PORTFOLIO INCLUDES

NEONATAL ENTERAL NUTRITION

NEONATAL VASCULAR ACCESS

NEONATAL THERMOREGULATION

NEONATAL RESPIRATORY SUPPORT

SURGMED GROUP

Proudly Canadian, **The Surgmed™ Group of Companies** began operations in 1992 as a single distribution company known as **Advanced Surgi-Pharm Inc**. The company quickly became known as an industry leader and specialty distributor of value-added surgical products in the Canadian hospital market. Five years later, **Surgmed expanded upon its success with the launch of Batrik Medical Manufacturing Inc.** in 1997 and the subsequent acquisition of **Imperial Surgical Ltd.** one year later in 1998.

Together, our three unique companies serve the Canadian and global healthcare markets with high quality and competitively priced products, all backed by world-class customer care.

ADVANCED SURGI-PHARM

Founded in 1992, Advanced Surgi-Pharm Inc. is the distribution arm of Surgmed™ in Canada, representing leading US, international and domestic manufacturers for a wide range of specialty products with unique benefits for applications in the Operating Room, Women's Health, Labor & Delivery, ICU, and Sterile Processing areas. Equipped with a direct sales team, ASP provides effective nationwide coverage as the Canadian distributor of Batrik, Vygon, Rocket Medical, Cooper Surgical, SunMed, and other industry leading products including a wide-ranging portfolio of top-rated PPE products.

BATRIK MEDICAL

Established in 1997 and sold in 85 countries globally, Batrik Medical Manufacturing Inc. specializes in the manufacturing of endoscopy accessories, enzymatic solutions, infection control, central sterilization, and surgical devices. Batrik's in-house controlled environment production facility adheres to strictly enforced quality and regulatory control systems. They are registered as a device manufacturing establishment with the United States FDA and are in full compliance with CE and Health Canada Regulations. All Batrik products are rigorously tested, liability insured, and meet/exceed high international quality standards.

IMPERIAL SURGICAL®

Established in 1935, Imperial Surgical Ltd. is one of Canada's oldest hospital capital equipment manufacturers, well-known for their stainless steel healthcare equipment for Sterile Processing, Operating Room, Examination and Treatment, Patient Handling, and Mortuary/ Pathology areas. Their growing portfolio of products also has applications in Infection Control & Prevention, an important area of focus for their future.

naso-gastric

Feeding Tubes

Feeding tubes in DEHP-free PVC (for short-term use) and polyurethane (for medium-term use) with flexible female mount and cap.

- Smoothly rounded, closed distal tip and opposed lateral eyes
- Radiopaque
- Available in various lengths: Centimeter graduations (5cm to 25cm)

Standard tube

PVC tubes

Size	04 Fr	05 Fr	06 Fr	07 Fr	08 Fr	09 Fr	10 Fr	12 Fr	Units/Case
40 cm	310.04	310.05	310.06	310.07	-	-	-	-	50
50 cm	-	-	-	-	310.08	310.09	310.10	310.12	50
75 cm	311.04	311.05	311.06	-	311.08	-	311.10	-	50
125 cm	312.04	-	312.06	312.07	312.08	312.09	312.10	312.12	25

PUR tubes

Size	04 Fr	05 Fr	06 Fr	08 Fr	Units/Case
40 cm	1310.04	1310.05	1310.06	-	25
50 cm	-	-	-	1310.08	25
75 cm	-	1311.05	1311.06	1311.08	25

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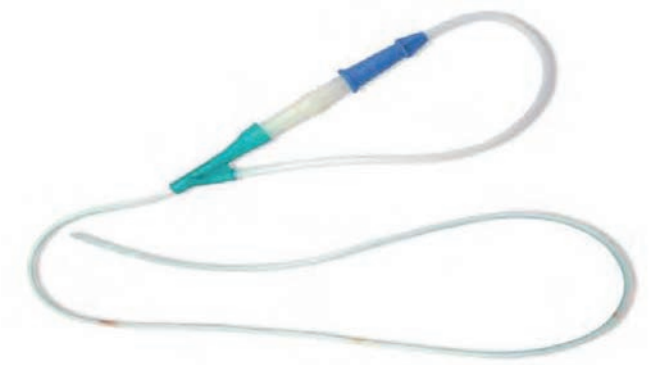
dual-flow**gastric**

Feeding Tubes

The dual-flow gastric tubes are used to prevent the accumulation of gastric secretions and air, thus allowing decompression of the stomach by continuous aspiration without trauma to the gastric mucosa.



Dual-flow tube

Dual-flow gastric tubes

Product Code		Size	Length	Number of eyes	Units/Case
PVC	PUR				
340.06	1340.06	6 Fr	60 cm	6	10
340.08	1340.08	8 Fr	60 cm	6	10
340.10	1340.10	10 Fr	90 cm	10	10
340.12	1340.12	12 Fr	90 cm	10	10
340.14	-	14 Fr	120 cm	10	10
340.16	1340.16	16 Fr	120 cm	10	10
340.18	1340.18	18 Fr	120 cm	10	10

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gastro-duodenal

Feeding Tubes

125 cm tubes for placement in the duodenum.

Weighted tubes: Silicone (for both medium and long-term use) tube with weighted metal tip to facilitate placement

Levin type tubes: DEHP-free PVC (for short-term use) tubes for gastric decompression or gavage feeding.

Silicone tube

Levin type tubes with standard connector

Weighted tubes (silicone)

Product Code	Size	Units/Case
2395.05	5 Fr	25
2395.06	6 Fr	25
2395.09	9 Fr	25

Levin type tubes with standard connector (PVC)

Product Code	Size	Units/Case
391.10	10 Fr	50
391.12	12 Fr	50
391.14	14 Fr	50
391.16	16 Fr	50

nutri**Safe2**®

A complete range dedicated to safe enteral nutrition. Designed to be fail-safe, the nutri**safe**2® system incorporates a unique connection that locks securely so it won't slip apart and yet cannot be connected to a standard 6% tapered luer fitting.

Safe - The risk of misconnection errors is significantly reduced for patient safety.

Secure - Accidental disconnection is nearly impossible, ensuring precious nutrients are received.

Simple - It does not change the technique of the users and therefore does not require any special training.

nutri**safe2® Feeding tubes**

nutri**safe**2® feeding tubes are available in a range of sizes, lengths and materials to suit patient needs. Numbered graduations every centimeter aid placement and monitoring, and the rounded tip provides atraumatic insertion.

PVC (DEHP-free): for use up to 5 days.

Polyurethane (PUR): for use up to 30 days.

Silicone: for use up to 30 days.

The nutri**safe**2® connection allows the use of these tubes only with other nutri**safe**2® devices..

PVC tubes

Size	04 Fr	05 Fr	06 Fr	08 Fr	10 Fr	Units/Case
40 cm	364.042	364.052	364.062	364.082	-	25
50 cm	361.042	361.052	361.062	361.082	361.102	50
75 cm	363.042	363.052	363.062	363.082	363.102	25
125 cm	362.042	362.052	362.062	362.082	362.102	25

PUR tubes

Size	04 Fr	05 Fr	06 Fr	08 Fr	10 Fr	Units/Case
40 cm	1364.042	1364.052	1364.062	1364.082	-	25
50 cm	1361.042	1361.052	1361.062	1361.082	1361.102	50
75 cm	1363.042	1363.052	1363.062	1363.082	1363.102	25
125 cm	1362.042	1362.052	1362.062	1362.082	1362.102	25

Silicone tubes

Size	04 Fr	05 Fr	06 Fr	08 Fr	10 Fr	Units/Case
50 cm	2331.042G	2331.052G	2331.062G	2331.082G	2331.102	10
125 cm	2332.042G	-	2332.062G	2332.082G	2332.102	10
125 cm (weighted)	-	-	2395.062G	2395.082G	-	10

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nutrisafe2® Syringes

A complete range of syringes, from 1 ml to 60ml for administration of enteral nutrition and oral medication.

Amber colored syringes allow preservation of light sensitive drugs.
They are available with caps.

These syringes only connect with other items in the nutrisafe2® range.

Transparent syringes

Amber syringes

C-GON - Transparent syringes

Product Code	Volume	Graduations	Connection	Units/Case
1015.012	1 ml	0.01 ml	Centered / slip	100
1015.022	2.5 ml	0.1 ml	Centered / slip	100
1015.052	5 ml	0.2 ml	Centered / slip	100
1015.102	10 ml	0.2 ml	Centered / lock	100
1015.202	20 ml	1 ml	Centered / lock	50
1015.352	35 ml	1 ml	Centered / lock	50
1015.602	60 ml	1 ml	Offset / lock	25

Monoject - Transparent syringes

Product Code	Volume	Graduations	Connection	Units/Case
1015.062M	6 ml	0.1 ml	Centered / slip	100
1015.202M	20 ml	1 ml	Centered / lock	50
1015.352M	35 ml	1 ml	Offset / lock	25
1015.602M	60 ml	1 ml	Offset / lock	25

Amber syringes (bulk non-sterile)

Product Code	Volume	Graduations	Connection	Units/Case
1022.012	1 ml	0.01 ml	Centered / slip	50
1022.022	2.5 ml	0.1 ml	Centered / slip	50
1022.052	5 ml	0.2 ml	Centered / lock	50
1022.102	10 ml	1 ml	Centered / lock	50

nutrisafe2®Extension lines

Extension lines to allow for positioning of the syringe driver away from the incubator and to move handling away from the newborn.

Available in standard bore for breast milk or in large bore for fortified milk.

Product Code	Int. ø	Length	Clamp	Units/Case
368.032-50	1.5 mm	30 cm	No	50
368.152-50	1.5 mm	150 cm	No	50
369.152	2.8 mm	150 cm	No	25

nutrisafe2® Caps

A range of caps to secure the contents of vials containing oral / enteral medications. These caps allow access to the medication only from a nutrisafe2® syringe, to avoid risk of accidental injection through IV systems.

Caps for syringes and tubes prevent contamination of the feed or drugs between feeding sessions.

Needleless vial access caps

Product Code	Connector	Int. ø	Units/Case
821.022	male	20 mm	25

Needleless vial access caps

Caps for syringes and tubes

Product Code	Description	Units/Case
828.01	Cap for syringe (x1)	100
828.08	Cap for syringe (x8)	100

Syringe cap

Vented caps for syringes - for gravity feeding

Product Code	Description	Units/Case
818.22	20 ml	50
818.62	60 ml	50

Vented cap

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nutri**safe**2® sampling straws

nutri**safe**2® drawing-up straws allow the filling of nutri**safe**2® syringes with feed or medication from all sizes of containers and bottles.

Product Code	Size	Bore	Units/Case
817.052	5 cm	Standard bore	50
817.152	15 cm	Standard bore	50
817.153	15 cm	Large bore	50
817.202	20 cm	Standard bore	50
817.203	20 cm	Large bore	50
817.302	30 cm	Large bore	50
817.502	50 cm	Standard bore	20

nutri**safe**2® accessories

Connectors, stopcocks and accessories to facilitate daily use of the nutri**safe**2® range.

Connectors

Product Code	Description	Units/Case
368.02	Adaptor for feeding sets	100
368.12	Taper connector	30
368.32	Extension tube with connector for suction	25
368.42R	Y connector with oral port	100

Adaptor for feeding sets

Y connector

Tapper Connector

Extension Tube with connector

Stopcock

Product Code	Description	Units/Case
5802.01	3-way stopcock	50

Stopcock

Adapters

Product Code	Description	Units/Case
828.88	Oral tip adapter	1000
828.99	Medicine cap adapter	1000

Oral tip adapter

Medicine cap adapter

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Premicath®

A 1Fr PICC line designed specially for newborns under 1kg

Infants born prematurely weighing under 1kg often need the nutritional and therapeutic support that can only be delivered into their tiny vessels via venous access. At just 1Fr, premi**cath**® has been specially designed for the smallest and most fragile babies to deliver optimum accuracy during placement as well as minimising trauma for patients.

Available with choice of introducers including splitting needle and micro**flash**®

Flushable styletted line

- For checking the line patency
- Stylet allows for clear visual confirmation and easier catheter advancing

Extension line

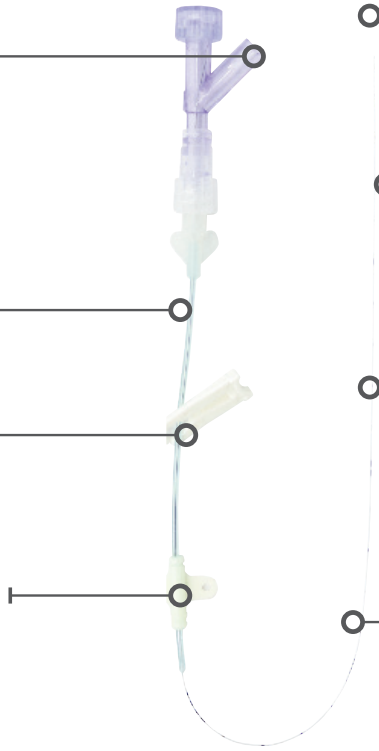
- Integrated extension with small fixation wings give better catheter stabilisation

Small round clamp

- Small line clamp for line management

Fixation wings

- Designed to be used with Grip-lok™



X-ray opaque

- X-ray opaque for accurate tip location without additional contrast medium

Small 1Fr gauge

- Minimises vessel trauma and suits the veins of very low weight premature babies (<1kg)

Black markings

- Markings every centimetre with bigger black marking at the tip for accurate catheter placement and confirmation of full catheter removal

PUR material

- PUR material is firm during insertion but softens with body temperature, which minimises vessel trauma and enhances dwell time

Premicath® without stylet

Premicath® with stylet

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Premicath®

Product Code	Catheter			Introducer		Stylet	Units/Box
	Length	Priming Volume	Flow rate (Pressure 1 bar)	Type	Size		
1261.20G	20 cm	0.09 ml	0.7 ml / min	Splitting Needle	24 G	No	10
1261.203G	20 cm	0.09 ml	0.7 ml / min	Splitting Needle	24 G	Yes	10
1261.205G	20 cm	0.09 ml	0.7 ml / min	Neocath Split	22 G	Yes	10
1261.208G	20 cm	0.09 ml	0.7 ml / min	Microflash	20 G	Yes	10
1261.306G	30 cm	0.11 ml	0.6 ml / min	No Introducer	-	Yes	10
Higher Barium							
1261.203A	20 cm	0.09 ml	0.7 ml / min	Splitting Needle	24 G	Yes	10
1261.306A	30 cm	0.11 ml	0.6 ml / min	No Introducer	-	Yes	10

Kits & Accessories

Product Code	Description	Units/Box
7371.19	20 G Microflash Introducer	10
1261.20N	24 G Splitting Needle	20
AMS-850TC	V-Cutter Catheter Trimming Tool	20

V-Cutter

Splitting needle

Microflash

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nutriline®

A PICC line with a unique & easy-to-use peelable needle available in 2 Fr

nutri**line**'s one-piece catheter provides clinicians with a high degree of safety. Available in a choice of lengths to ensure accurate tip placement for most IV access sites.

Flushable styletted line
- For checking the line patency
- Stylet allows for clear visual confirmation and easier catheter advancing

Extension line
- Integrated extension with small fixation wings give better catheter stabilisation

Small round clamp
- Small line clamp for line management

Fixation wings
- Designed to be used with supplied Grip-**lok**™

X-ray opaque
- X-ray opaque for accurate tip location without additional contrast medium

Black markings
- Markings every centimetre with bigger black marking at the tip for accurate catheter placement and confirmation of full catheter removal

PUR material
- PUR material is firm during insertion but softens with body temperature, which minimises vessel trauma and enhances dwell time

Product code	Length	Size	Priming volume	Flow rate	Introducer	Stylet	Units/Case
1252.30G	30 cm	2 Fr	0.12 ml	5.0 ml / min	Splitting needle 20 G	No	10
1252.31G	30 cm	2 Fr	0.12 ml	5.0 ml / min	No Introducer	No	10
1252.35G	30 cm	2 Fr	0.12 ml	5.0 ml / min	Microflash 20 G	No	10
1252.030G	30 cm	2 Fr	0.12 m l	5.0 ml / min	Microflash 20 G	Yes	10
1252.031	30 cm	2 Fr	0.12 ml	5.0 ml / min	No Introducer	Yes	10

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nutriline® TWINFLO

A 2Fr dual lumen catheter with peelable needle

nutri**line**® twinflo has been designed specifically for babies who require multiple infusions. Its dual lumen tip design offers enhanced fluid management and avoids incompatible drugs mixing.

Flushable styletted line

- For checking the line patency
- Stylet allows for clear visual confirmation and easier catheter advancing

Small round clamp

- Small line clamp for line management

Extension line

- Integrated extension with small fixation wings give better catheter stabilisation

Dual lumen right to the tip

- Avoids incompatible drugs mixing

Colour-coded hubs

- For easy identification and safety

PUR material

- PUR material is firm during insertion but softens with body temperature, which minimises vessel trauma and enhances dwell time

X-ray opaque

- X-ray opaque for accurate tip location without additional contrast medium

Product Code	Catheter			Introducer		Stylet	Units / Case
	Length	Priming Case Volume	Flow rate (pressure 1bar)	Type	Size		
1252.232G	30 cm	2 x 0.2 ml	2 x 1.45 ml / min	No introducer	-	No	10
1252.232M	30 cm	2 x 0.2 ml	2 x 1.45 ml / min	Microflash	20 G	No	10
1252.230G	30 cm	2 x 0.2 ml	2 x 1.45 ml / min	Microflash	20 G	Yes	10

Kits & Accessories

Product Code	Description	Units/Box
7371.19	20 G Microflash Introducer	10
1261.20N	24 G Splitting Needle	20
AMS-850TC	V-Cutter Catheter Trimming Tool	20

Microflash

Splitting needle

V-Cutter

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VYGON

Vascular Access

Extended Dwell Peripheral Catheter

Leaderflex

Easy to insert catheter for patients who require IV therapy for more than three days

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We should purposefully reduce venous depletion for ALL patients because...

- 60-90% of patients require an IV during their hospital stay, making it the most common invasive procedure.[1,2]
- First-attempt insertion is unsuccessful in 12-54% of patients.[1,3]
- Repeated insertion attempts lead to vessel trauma and increases subsequent catheter failure, the risk of phlebitis and MRSA bloodstream infections.[1,4]
- Studies indicate overall IV failure rate lies between 35-56%, i nd guided placements.[1,4]
- Up to 92% of catheters fail before therapy is complete.[1,2]
- PICCs are known to be inappropriately used, up to 43%, when a PIV is difficult to access or maintain, increasing risk of CLABSI and DVT.[1,5,6]

Current care, requiring additional needlesticks for patients, increased work for clinicians and higher health care costs, is confirmation that an acceptable solution to the problem of optimal peripheral IV care has yet to be found.[1,2]

A new tool in the toolbox, the extended dwell peripheral IV catheter is the solution for...

- Reducing Repeated Venipunctures
- Vein Preservation
- Infusion of Antibiotics, Hydration & Pain Medications
- Therapy for 3 - 29 Days
- Difficult Venous Access
- Reduces Risk Associated with PICC lines (CLABSI & DVT)
- Does Not Require X-Ray
- Reduces Patient Discomfort & Increases Satisfaction

EPIVs are a practical and safe bridge between PIVs and PICC lines.[7]

VYGON

leader**flex**
a 22 Ga Extended Dwell Peripheral IV Catheter (EPIV)

Leaderflex

LeaderFlex is inserted using Seldinger Technique and has a dwell time up to 29 days. LeaderFlex is a thermosensitive polyurethane catheter that can be used as a peripheral venous catheter in any patient population with consideration given to adequacy of vascular anatomy and appropriateness of procedure.

Seldinger Insertion Technique

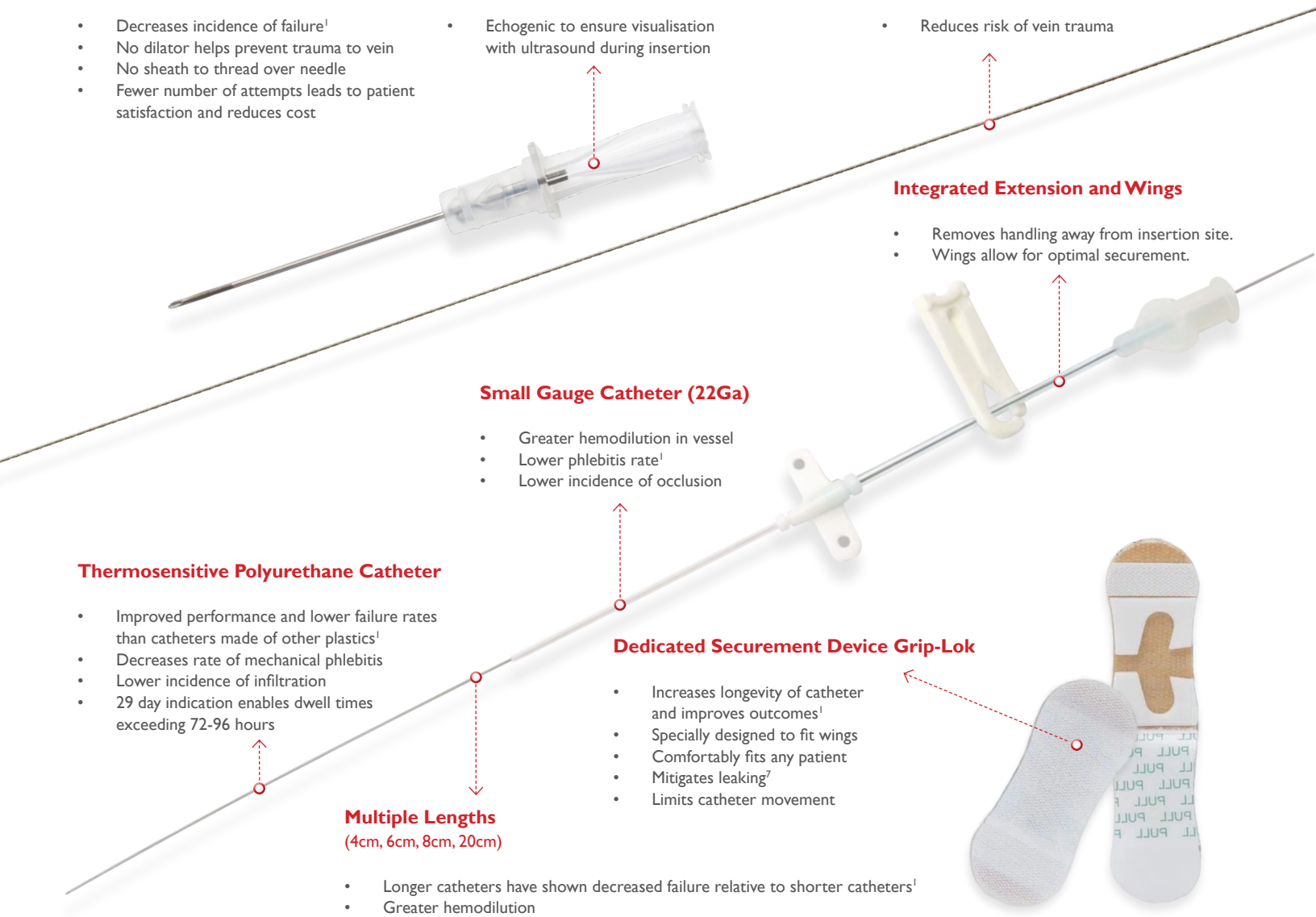
- Decreases incidence of failure[1]
- No dilator helps prevent trauma to vein
- No sheath to thread over needle
- Fewer number of attempts leads to patient satisfaction and reduces cost

21 Ga Safety Introducer Needle

- Echogenic to ensure visualisation with ultrasound during insertion

Flexible .018" Guidewire

- Reduces risk of vein trauma



Integrated Extension and Wings

- Removes handling away from insertion site.
- Wings allow for optimal securement.

Small Gauge Catheter (22Ga)

- Greater hemodilution in vessel
- Lower phlebitis rate[1]
- Lower incidence of occlusion

Thermosensitive Polyurethane Catheter

- Improved performance and lower failure rates than catheters made of other plastics[1]
- Decreases rate of mechanical phlebitis
- Lower incidence of infiltration
- 29 day indication enables dwell times exceeding 72-96 hours

Dedicated Securement Device Grip-Lok

- Increases longevity of catheter and improves outcomes[1]
- Specially designed to fit wings
- Comfortably fits any patient
- Mitigates leaking[7]
- Limits catheter movement

Multiple Lengths
(4cm, 6cm, 8cm, 20cm)

- Longer catheters have shown decreased failure relative to shorter catheters[1]
- Greater hemodilution
- Patient considerations
- Trimming not needed
- Lower arm placement without entering AC space (area of flexion)

leaderflex

Product code	Catheter (polyurethane)						Introducer needle		Guidewire		Units per box
	Ø (Fr)	Length (cm)	Int. Ø - Ext. Ø (mm)	Dead space (ml)	Flow rate (ml/min)	Extension length (cm)	Gauge	Length (cm)	Ø (inch)	Length (cm)	
VYLF1004	2	4	0.5 - 0.7	0.15	17	4.4	22	4.2	0.18	23	20
VYLF1006	2	6	0.5 - 0.7	0.16	14	4.4	22	4.2	0.18	23	20
VYLF1008	2	8	0.5 - 0.7	0.17	12	4.4	22	4.2	0.18	26	20
VYLF1020	2	20	0.5 - 0.7	0.2	4.4	9.8	22	4.2	0.18	50	20

5804.08	Grip-Lok Pediatric Adhesive Securement Device	20

21 GA Safety Introducer Needle

Grip-lok Securement Device

Thermosensitive Polyurethane Catheter

Training, Education

and value analysis support tools

Instructional videos

Instructional video showing the insertion of a Leaderflex using sterile technique.

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Email: info@surgmed.com | Website: www.surgmed.com

introducers

For PICC catheters

Stand alone introducers for neonatal PICC catheters: splitting needle, micro**flash®** peelable cannula and IV cannula.

IV cannula

IV cannula

Product Code	Size	For catheter	Units/Case
CMS-207	24 G	1 Fr	10

Splitting needle

Splitting needle

Product Code	Size	For catheter	Units/Case
1261.20N	24 G	1 Fr	20
1262.30N	20G	2 Fr	20

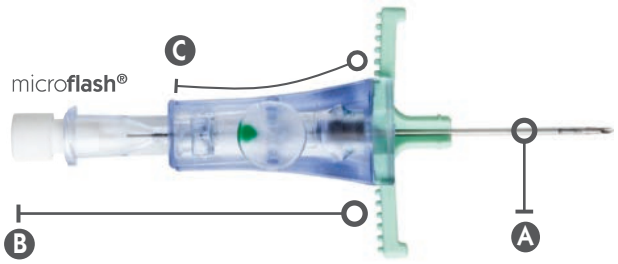
microflash™

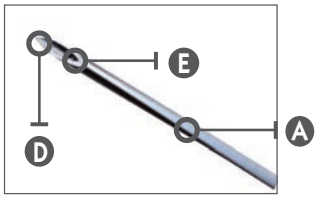
Peelable Introducer/Peelable Safety Introducer*

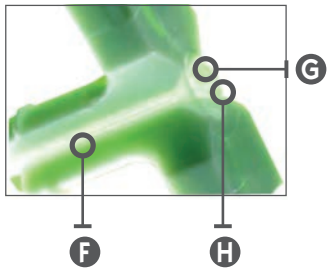
Peelable Introducer for the insertion of PICC & Midline catheters, with notched needle and clear cannula sheath for early detection of blood flashback

Product Code	Size	For catheter	Units/Case
7371.19	20 G	1 Fr / 2 Fr	10

- **A** Top hole needle shaft permits blood flashback between needle & cannula for immediate indication of vessel access
- **B** Short, light weight safety housing for balance and ease of handling
- **C** Curved hub for secure ergonomic fingertip placement
- **D** Tri-bevel needle tip for ease of skin penetration
- **E** Smooth needle to cannula transition reduces drag through the tissue
- **F** Transparent cannula permits immediate blood visualization upon vessel penetration
- **G** Funnel cannula opening to facilitate easy catheter entry
- **H** Radiopaque stripe on cannula for patient safety







* The micro**flash®** Introducer is intended for use as a split cannula introducer used to puncture peripheral veins.

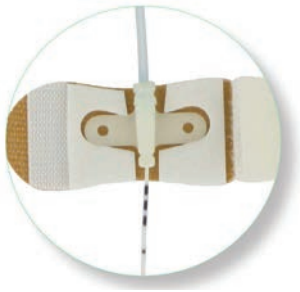
Griplok

Catheter Securement Device

Our Vygon Grip-**Lok®** is especially efficient with Vygon Neonatal Catheters. It is hypoallergenic and latex free, which means low risk of irritation and allergic reaction. Its zinc oxide adhesive allows for gentle, yet efficient skin fixation. The catheter fixation is secure to prevent migration and its suture-less fixation increases ease of use.

- Hypoallergenic
- Zinc Oxide Adhesive
- Specially designed hub insert
- Suture-less fixation
- Sterile
- Latex free

Efficient with Vygon Neonatal Catheters



premi**cath®** **1Fr**

nutri**line®** twinflo

Product Code	Description	Units/Case
5804.08	Grip-Lok Catheter Securement Device	20

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umbilical**catheters**

Single-lumen umbilical catheters

A single lumen umbilical catheter used for venous or arterial access.

Umbilical venous catheters are used for:

- Parenteral nutrition & fluid administration
- Drugs administration
- Venous blood sampling
- Transfusion of blood or blood products
- Exchange transfusion

Umbilical arterial catheters are used for:

- Arterial blood sampling
- Arterial pressure measurement
- Blood pH and blood gas analysis
- Fluids and drugs administration **Umbilical**

Three-way tap

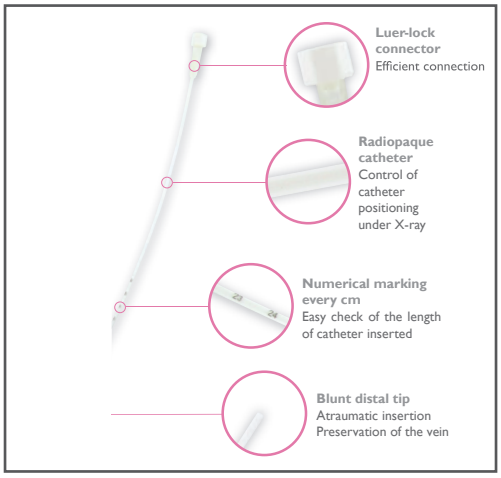
- Colour-coded caps for venous / arterial identification

Luer-lock connector

- For efficient connection

Numerical markings every cm

- Make it easy to check the length of catheter inserted



Product Code	Size	Length	Priming vol	Flow rate	Material	Units/Box
1270.02	2.5 Fr	30 cm	0.12 ml	>3 ml / min	PUR	8
1270.03	3.5 Fr	40 cm	0.27 ml	>10 ml/min	PUR	8
1270.04	4 Fr	40 cm	0.29 ml	>10 ml/min	PUR	20
1270.05	5 Fr	40 cm	0.40 ml	>23 ml/min	PUR	20
1270.08	8 Fr	40 cm	0.81 ml	>100 ml/min	PUR	20
270.04	4 Fr	37 cm	0.27 ml	>16 ml/min	PVC	15
270.05	5 Fr	37 cm	0.38 ml	>31 ml/min	PVC	15
270.06	6 Fr	37 cm	0.51 ml	>52 ml/min	PVC	15
270.08	8 Fr	37 cm	0.75 ml	>106 ml/min	PVC	15

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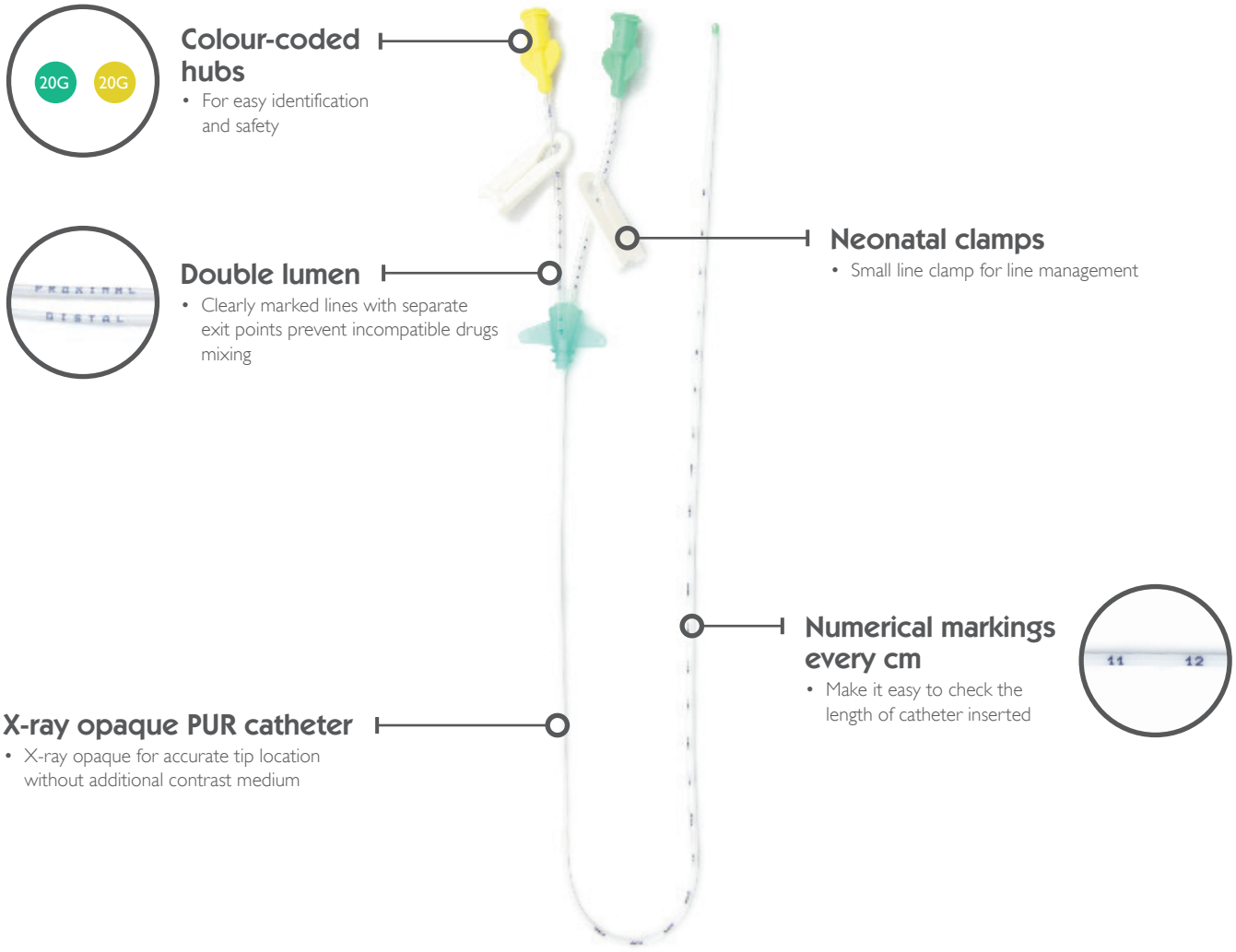
Double lumen umbilical catheter

A double lumen umbilical catheter for short term catheterisation through the umbilical vein when multiple access is needed.

- Infusion of incompatible drugs
- Reduces the need for additional access
- Infusion of medication and nutrition at the same time



	Product Code	Size	Exit Points	Length	Priming volume	Flow rate	Units/Box
PUR	1272.14	4Fr	One lateral One distal	20 cm	2 x 0.19 ml	11 & 12 ml/min	10
	1274.14	4Fr		40 cm	2 x 0.27 ml	6 & 7 ml/min	10
	1274.17	5Fr		40 cm	2 x 0.26 ml	7 & 9 ml/min	10

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Accessories for umbilical catheters

Lockable three-way stopcock with identification caps (red and blue) to distinguish between venous and arterial access.

- User feels digitally the position chosen
- Safety Luer-lock prevents accidental disconnections
- Lipid-resistant

Product Code	Description	Units/Case
876.20	Lockable three-way stopcock with identification caps (red and blue)	50

exchange transfusion tray

Set containing the accessories necessary to perform removal and replacement of a patient's blood.

Product Code	Contents	Units/Case
275.001	1x four-way stopcock equiped with 1 injection site (for injections of additional medication)	1
	1x extension tube for evacuation of the discarded blood	
	1x 5Fr exchange transfusion catheter (PVC - XRO) 37 cm long, with 2 sides holes and centimetric markings	
	1x 7Fr exchange transfusion catheter (PVC - XRO) 37 cm long, with 2 sides holes and centimetric markings	
	2x 20 ml Luer-lock syringes	
	1x 10 ml Luer-lock syringe	
	1x 16x0.5 mm (25G) Luer hypodermic needle	
	1x graduated plastic container (2000 ml)	
	1x transfusion set, 163 cm long, 18.8 ml dead volume	
	1x 15 cm ruler for venous pressure measurement	
	3x 50 x 50 mm gauze dressings	
	1x 50 x 60 cm fenestrated drap	
	1x air-venting needle	
	1x control sheet	

neohelp™

A sterile heat loss prevention suit to deliver life-saving thermal care

Immediately after a premature baby is delivered by c-section, the priority is to place them in a warm and sterile environment. neohelp™ provides this essential protection so other essential Golden Hour care and treatment, including delayed cord clamping, can take place.[1,2]

Integrated adjustable hood

Decreases heat loss through radiation:

- More efficient than a stockinette cap allowing air to pass through the material
- The toggle allows you to adjust to the baby's head

Double layer of soft clear polyethylene

Decreases heat loss through convection and evaporation:

- Creates a warm and humid environment, mimicking the incubator effect
- The thin inner allows for excellent skin contact
- Creates a barrier against drafts
- Allows passage of radiant heat from an additional warming device (if used)[3]
- Transparent material allows vital observations[4]

Pre-shaped foam support

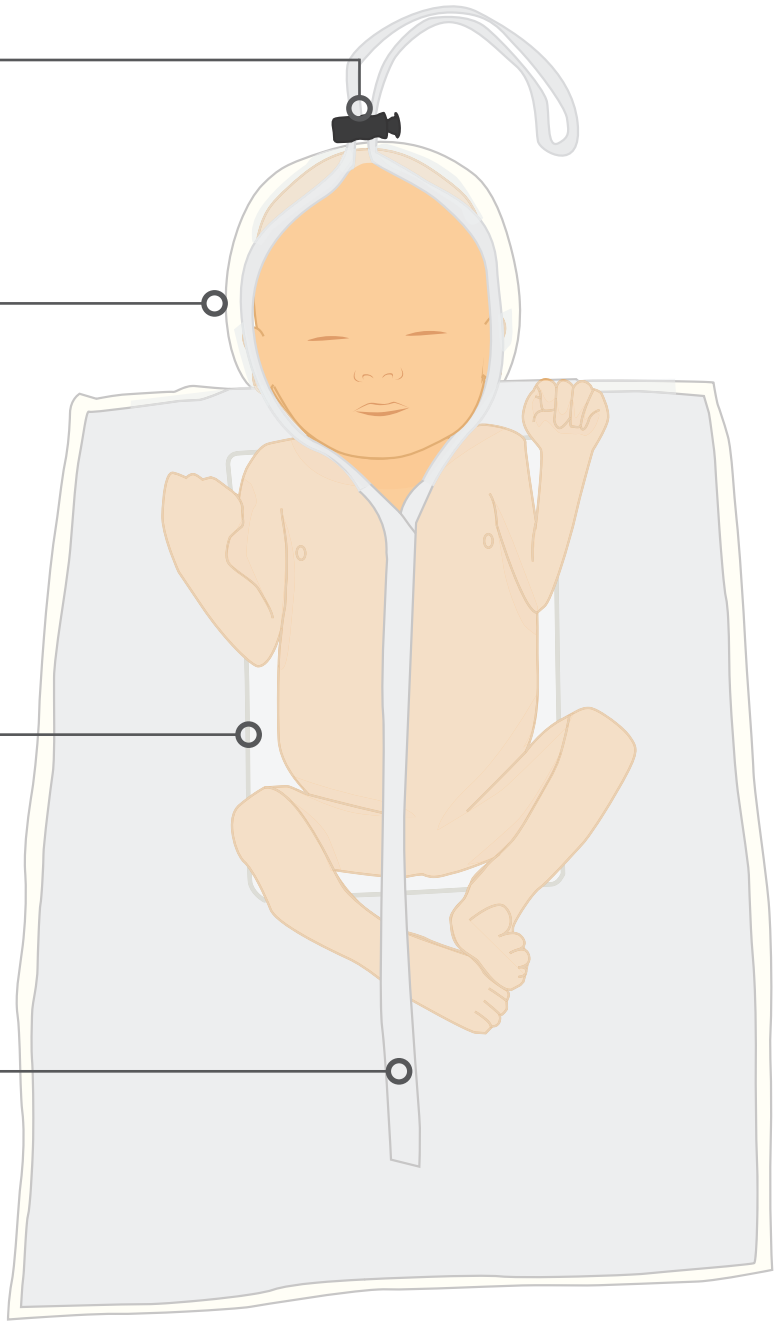
Decreases heat loss through conduction:

- Helps to maintain an open airway by raising wthe shoulders
- Stabilises the baby's position
- Provides thermal care during transportation
- Provides comfort

Central VELCRO® opening

Provides optimum seal to ensure heat conservation:

- Quick and easy to place around the baby
- Allows full access to the baby's body
- Designed for easy placement of monitoring equipment, IV, umbilical catheters and carrying out Golden Hour care



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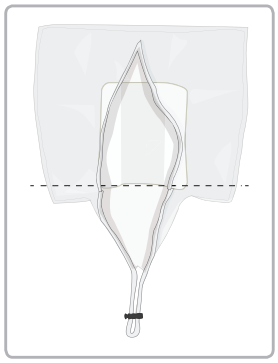
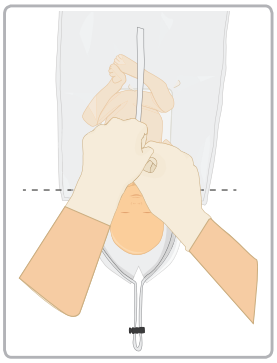
How to use neohelp™



1. Unfold neohelp™ completely.

2. Place it on the resuscitation table, under the heat lamp (if applicable).

3. Fully open the Velcro and the hood to facilitate the baby's reception.

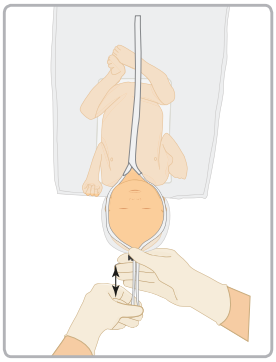


4. Do not dry the baby at birth.

5. Place the baby immediately afte birth in neohelp™

6. Align the shoulders at the upper edges of the foam.

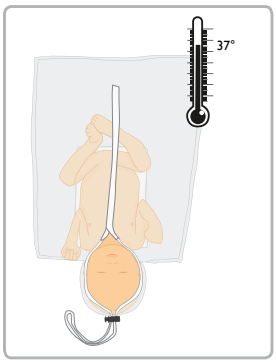
7. Close the Velcro tightly along its entire length.



8. Adjust the hood to the head of the baby.

Do not cover the airways due to the risk of suffocation.

9. Other heating appliances (e.g. heating) will need to be adjusted accordingly due to risk of hyperthermia.



10 The baby should be kept wrapped until temperature stabilization.

11 Temperature of the baby should be monitored continuously or consecutively (ideally every 5 minutes).

12 Do not use more than 24 hours.

Why is thermal care important?

Thermal care is vital for a preterm infant because they may have unbalanced skin-surface to weight ratio, very little or no capacity to generate heat (brown adipose tissue), inadequate stores of subcutaneous (insulating) fat and immature epidermal barrier. [4,5]

At this vital time, neohelp™ prevents heat loss through its double layer of soft, clear polyethylene, integrated adjustable hood and VELCRO® seal.

For every 1°C decrease:
Risk of sepsis increases **by 11%**
Risk of death increases **by 28%** [3]

In the first 10-20 minutes,
without any protection,
temperature can fall **by 2-4°C** [6]

Why is delayed cord clamping important?

Provided the baby can be kept warm and does not need immediate resuscitation, the Resuscitation Council UK (RCUK) recommends delayed cord clamping (DCC) for at least 60 seconds whilst breathing is established.[7]

Delayed cord clamping has been shown to reduce the relative risk of:

- Intraventricular haemorrhage by 41% (RR 0.59, 95% CI 0.41 to 0.85)[8]
- Necrotising enterocolitis by 38% (RR 0.62, 95% CI 0.43 to 0.90)[8]

In addition, this procedure increases circulation of blood volume after birth and an improvement in cardiovascular stability, reducing the need for a blood transfusion.

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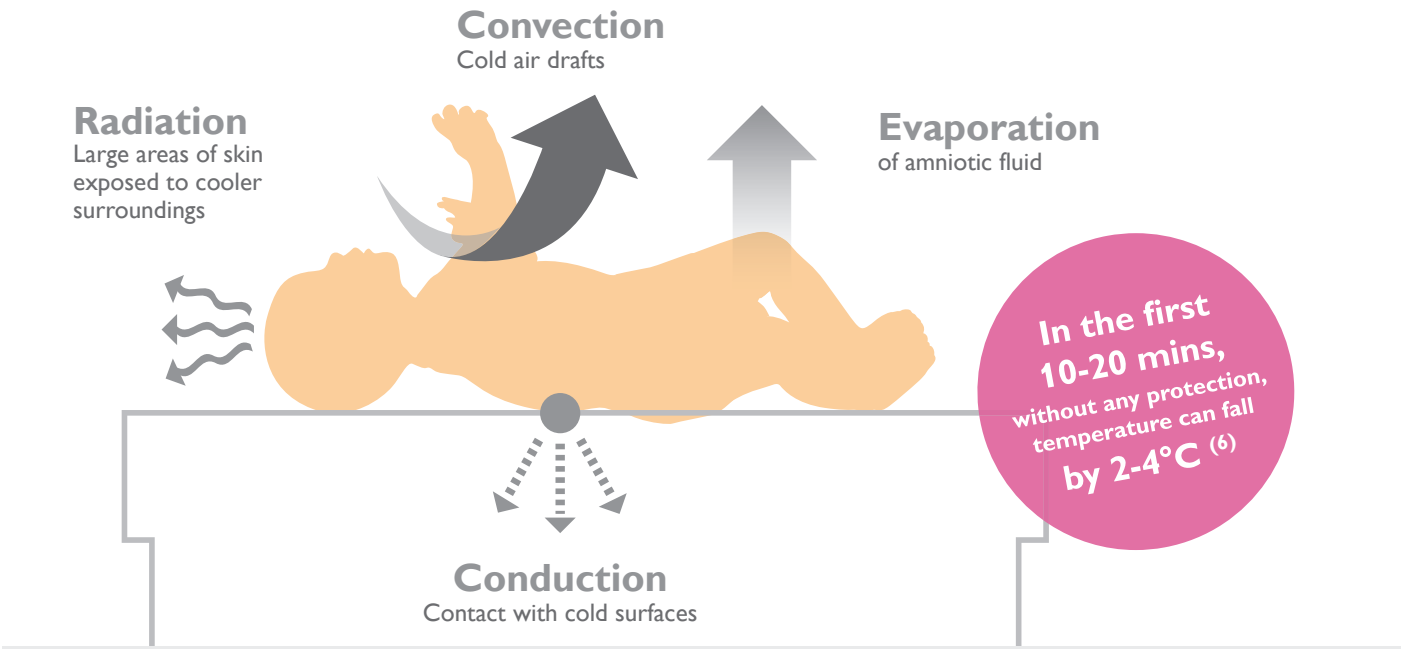
Neonatal hypothermia: a worldwide issue

Hypothermia is an **important factor** in **morbidity** and **mortality** of all birthweights and gestational ages, and **particularly for vulnerable preterm infants**[9].

Incidence of hypothermia on admission in the NICU from the delivery room is [10]:
- ≥ 56% for infants < 750g
- ≥ 25% for infants ≤ 2500g



Consequences of neonatal hypothermia

Consequences of neonatal hypothermia (9,4)

Respiratory distress

Hypoxia

Coagulation defects

Intraventricular hemorrhage

Brain damage

Metabolic acidosis

Hypoglycemia

Infection / Septicaemia

Death

For every 1°C decrease [4]:
- sepsis increases by 11%
- risk of death increases by 28%

Neonatal heat loss prevention suit

neo**help**™ is a sterile suit to swaddle the baby immediately after birth (before resuscitation).

- Polyethylene
- Occlusive
- Transparent

neo**help**™ prevents heat loss due to convection, conduction, radiation and evaporation.

Product Code	Baby weight	Description	Dimensions	Units/Box
37.09.14	< 1 kg	neo**help**™ Small	L. 38 cm x W. 30 cm	10
37.09.15	1 – 2.5 kg	neo**help**™ Medium	L. 44 cm x W. 38 cm	10
37.09.16	> 2.5 kg	neo**help**™ Large	L. 50 cm x W. 38 cm	10

International recommendations

"The transparency of bags makes it easier for caregivers to observe and manage the infant with minimal disruption of the wrap."[4]

"The transport incubator used to limit heat loss can be cumbersome and difficult to obtain. It may be «replaced » by a stockinette cap and a transparent polyethylene bag wrapping whilst the baby is still wet. This greatly reduces the risk of hypothermia."[11]

" Meta-analysis of […] studies found that plastic wraps (polyurethane or polyethylene bag) were statistically significantly more effective than routine care in reducing heat losses in infants aged < 28 weeks' of gestation.Stockinette caps were not effective in reducing heat loss in infants".[12]

References

1. Rabe H, Diaz-Rossello JL, Duley L, Dowswell T. Effect of timing of umbilical cord clamping and other strategies to influence placental transfusion at preterm birth on maternal and infant outcomes. Cochrane Database Syst Rev 2012;8 CD003248.
2. Backes CH, Rivera BK, Haque U, et al. Placental transfusion strategies in very preterm neonates: a systematic review and metaanalysis. ObstetGynecol2014; 124:47-56
3. W.WMV, Mori R. Interventions to prevent hypothermia at birth in preterm and/or low birth weight infant. RHL.
4. T. Cordaro and al. Hypothermia and occlusive skin wrap in the low birth weight premature infant. NAINR. 2012;12(2):78-85.
5. B. Mathew and al.Vinyl Bags prevent hypothermia At Birth in Preterm Infants. 2006.
6. World Health Organisation (WHO).Thermal protection of the newborn: practical guide. 1997.
7. Resuscitation-Council-UK-(RCUK).Newborn Life Support – National Resuscitation Guidelines. 2015.
8. Rabe H, Diaz-Rossello JL, Duley L, Dowswell T. Early cord clamping versus delayed cord clamping or cord milking for preterm babies. Cochrane Database Syst Rev 2012;15 CD003248.
9. The Cochrane Collaboration. Interventions to prevent hypothermia at birth in preterm and/or low birthweight infants (review), 2010.
10. DR Bhatt, R. White and al. Transitional hypothermia in preterm newborns. Journal of Perinatalogy, 2007.
11. J.F. Diependaele and A. Fily. Management of a newborn baby, 51st congress of French Society of Anesthesia and Intensive care, 2009.
12. Wariki WMV and Mori R. Interventions to prevent hypothermia at birth in preterm and/or lowbirth-weight infants: RHL commentary (last revised: 1 June 2010). The WHO Reproductive Health Library; Geneva: World Health Organization.

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Warm Gel®

Infant Heel Warmer

Uniform heat to reduce heel sticks

WarmGel® Infant Heel Warmer is a gel-filled, disposable heel warmer designed to provide gentle heat to increase blood flow and enhance infant blood sample collection.

WarmGel® Technology

Effective

- Conforms to infant's shape, keeping warmth where needed
- Even heat distribution increases blood flow

Safe

- Non-toxic food-grade gel won't harm infant's skin or eyes
- Single-patient use minimizes risk of infection

Reliable

- Reaches maximum temperature in less than 60 seconds, maintains optimal 104º F for 10 minutes [1]
- Trigger disc minimizes auto-activation during shipment

WarmGel® Versus Liquid

- Conforms to infant's shape
- Provides even heat distribution
- Resists migration, keeping warmth where needed
- Competitively priced compared to liquid-filled products

Item #	Description
24401	Liquid Heel Warmer (100/Box)
20418	WarmGel® Infant Heel Warmer (100/Box)

1"Neonatal Thermoregulation: Guidelines for Practice," National Association of Neonatal Nurses, 1997.

CA CE

TransWarmer®

Transport Mattress

Consistent, Safe Warming for Newborns

The TransWarmer® Infant Transport Mattress provides safe and reliable heat for up to two hours when cold stress is a concern. This thermostable, nontoxic gel mattress nests the infant in soothing warmth, while minimizing vibration during transport. Based on a 24 °C/75 °F start temperature, the mattress reaches a peak temperature of 40 °C/104 °F in less than 60 seconds - quickly improving the infant's admission temperature and reducing the risk of hypothermia.

Features and Benefits

- Comfortable, gel-filled mattress cradles baby in therapeutic warmth
- Gently conforms to the patient's shape for better nesting
- Minimizes the risk of hypothermia in cesarean deliveries
- Better heat distribution increases blood flow
- Disposable heat pack minimizes risk of cross contamination and infection
- Patented disc mechanism is easy to activate
- TransWarmer is nontoxic, latex- and PVC-free
- Use in labar and delivery, NICU, nursery, OR, ER, and transport units
- 10" wide x 16" tall

Item #	Description
20421	TransWarmer® Infant Transport Mattress (6/Box)

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surfcath™

Respiratory Distress Syndrome (RDS)

RDS is a pulmonary disorder resulting from a surfactant deficiency which commonly occurs in infants whose lungs have not yet fully developed.

In Europe, RDS is observed for about 90% of babies born at 24 weeks of gestation and for 80% of babies born at 28 weeks of gestation.[1]

International recommendations [1]

" Preterm infants should be managed without mechanical ventilation where possible"

"CPAP with early rescue surfactant is considered optimal management for babies with RDS"

" LISA is the preferred mode of surfactant administration for spontaneously breathing babies on CPAP, provided that clinicians are experienced with this technique"

European Consensus Guidelines on the Management of RDS - 2019

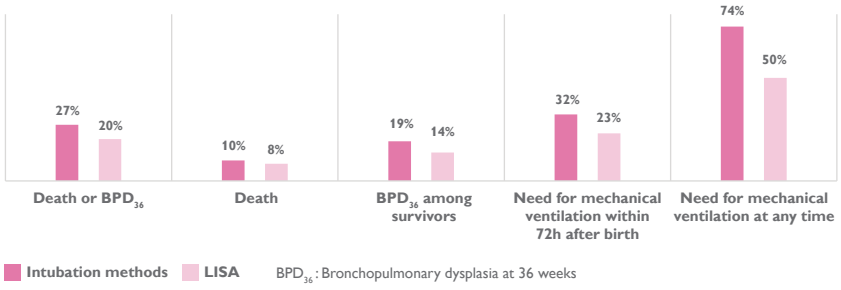
LISA method:
Less Invasive Surfactant Administration

LISA method consists of a surfactant administration through a thin catheter insered with Magill forceps through the vocal cords while maintaining a non-invasive ventilation.

Clinical Evidence[2]

Objective: A systematic review of 6 randomized controlled trials, enrolling a total of 895 preterm infants, comparing LISA method with surfactant delivery methods using an endotracheal tube.

Meta-analysis of the clinical outcomes :



Conclusion: "*LISA technique for surfactant delivery results in a lesser need for mechanical ventilation in infants with RDS,* ***reduction in the composite outcome of death or BPD at 36 weeks, and BPD$_{36}$ among survivors***

References

1 David G. Sweet et al. ,European Consensus Guidelines on the Management of Respiratory Distress Syndrome – 2019 Update

2 Aldana-Aguirre JC, Pinto M, Featherstone RM, et al. Arch Dis Child Fetal Neonatal Ed 2017;102:F17– F23

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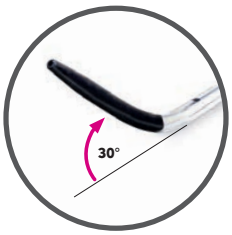
A catheter for surfactant administration using the LISA technique

For babies needing treatment for respiratory distress syndrome (RDS), our new surf**cath**™ uses the LISA (Less Invasive Surfactant Administration) technique to place the catheter. It was specifically designed to improve manoeuvrability during placement whilst also eliminating the need for the commonly used Magill forceps.



2cm soft distal black tip

- 2cm mark shows when surfcath™ is in place
- Soft tip minimises risk of tracheal lesions and prevents kinking
- Pre-curved to follow the airway anatomy and eases the passage between the vocal cords

Transparent bendable thermoplastic material

- Transparent material allows visual check on the delivery of surfactant
- Thermosensitive material allows you to curve surfcath™ prior to use meaning no need for Magill forceps
- Semi-rigid material also allows high manoeuvrability, helping to follow the airway anatomy

Less invasive 6Fr gauge

- No obstruction of the airways allowing spontaneous breathing
- Low dead space (0.2mL)

20cm length with cm markings

- Longer length eases manipulation of the surfactant syringe away from the patient's head
- Centimetre markings indicate the inserted length and check that surf**cath**™ stays in place

Scan to watch our video
on how to use surf**cath**™

Please note: The link will take you to an external website

Code	Size	Length	Priming vol	Units/Box
5590.106	6 Fr	20 cm	0.2 ml	10

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endotracheal tubes

Single and double lumen tubes in PVC (DEHP-free) for emergency oral or nasal intubation and routine anesthesia. Double lumen tubes have secondary lumen for surfactant administration or airway monitoring.

- Radiopaque
- 15mm adapter
- Markings every half centimeter

Single lumen tubes are also available as a soft tube designed to minimize tracheal damage during long term intubation.

ET tube standard

ET tube with secondary lumen

Plain endotracheal tubes

Product Code		Ext. ø	Int. ø	Length	Units/Case
Standard	Soft tube				
516.20	520.20	3.4 mm	2.0 mm	165 mm	25
516.25	520.25	4.1 mm	2.5 mm	165 mm	25
516.30	520.30	4.6 mm	3.0 mm	165 mm	25
516.35	520.35	5.2 mm	3.5 mm	165 mm	25
516.40	520.40	5.7 mm	4.0 mm	230 mm	20
516.45	520.45	6.2 mm	4.5 mm	230 mm	20

Endotracheal tubes with secondary lumen

Product Code	Tube			Secondary lumen		Units/Case
Standard	Ext. ø	Int. ø	Length	Lumen daim.	Flow rate	
5516.20	3.4 mm	2.0 mm	165 mm	0.40 mm	2.15 ml/min	20
5516.25	4.1 mm	2.5 mm	165 mm	0.55 mm	3.35 ml/min	20
5516.30	4.6 mm	3.0 mm	165 mm	0.65 mm	5.00 ml/min	20
5516.35	5.2 mm	3.5 mm	165 mm	0.80 mm	15.0 ml/min	20
5516.40	5.7 mm	4.0 mm	230 mm	0.95 mm	35.0 ml/min	20

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mucus extractors

Mucaid allows for quick and safe suctioning and sampling of the upper respiratory tract in the newborn using mechanical / wall suction. This avoids the dangers of self-contamination inherent in oral suctioning (De Lee method).

Included in the range are Mucaid with a secure threaded cap for safe transportation of sample for testing and Mucaid with a filter to prevent any mucus or amniotic fluid from passing through into the line.

Meconium aspirators allows for suctioning below the vocal cords to clear meconium from the lungs and airways.

- Finger tip control
- Endotracheal tube and endotracheal tube hub
- Rounded, soft tip
- Centimeters every half centimeter

Mucaid

Mecomium aspirator

Mucaid: Mucus extractor

Product Code	Volume	Tubing to suction source length	Catheter	Units/Case
542.06	25 ml	24 cm	6 Fr - 33 cm	25
542.08	25 ml	24 cm	8 Fr - 33 cm	25
542.10	25 ml	24 cm	10 Fr - 33 cm	25

Mucaid wih filter

Product Code	Volume	Tubing to suction source length	Catheter	Units/Case
80.542.10B	25 ml	24 cm	10 Fr - 33 cm	25

Mecomium aspirator

Product Code	Int. Ø	Length	Units/Case
80.516.30D-25	3.0 mm	165 mm	25
80.516.35D-25	3.5 mm	165 mm	25

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nasal ventilation

Single ventilation tube

Single silicone nasal tubes designed to reduce the stress related to ventilation and to improve the comfort of premature babies and newborns.

- Open tip
- 15mm adapter

Single ventilation tube

Double tube in silicone for nasal neonatal ventilation

Length of tube on 2 branches: 6 cm, except code 2596.30: 7 cm.

Open and rounded distal tips and centimetric markings.

The proximal end has an ISO standard 15 mm adaptor. This tube is specially designed to avoid tracheal intubation which is very traumatic, and to improve the comfort of premature babies and neonates.

4 sizes are available: Ext. Ø 2.7 mm - 3.4 mm - 4.0 mm - 5.0 mm

Double tube in silicone for nasal neonatal ventilation

Product Code	Int. ø	Ext. ø	Diameter	Length	Units/Case
Single Tube					
2595.15	1.5 mm	2.7 mm	8 Fr	9 cm	50
2595.20	2.0 mm	3.4 mm	10 Fr	9 cm	50
2595.25	2.5 mm	4.0 mm	12 Fr	9 cm	50
2595.30	3.0 mm	5.0 mm	14 Fr	9 cm	50
Double Tube					
2596.15	1.5 mm	2.7 mm	8 Fr	6 cm	50
2596.20	2.0 mm	3.4 mm	10 Fr	6 cm	50
2596.25	2.5 mm	4.0 mm	12 Fr	6 cm	50
2596.30	3.0 mm	5.0 mm	15 Fr	7 cm	50

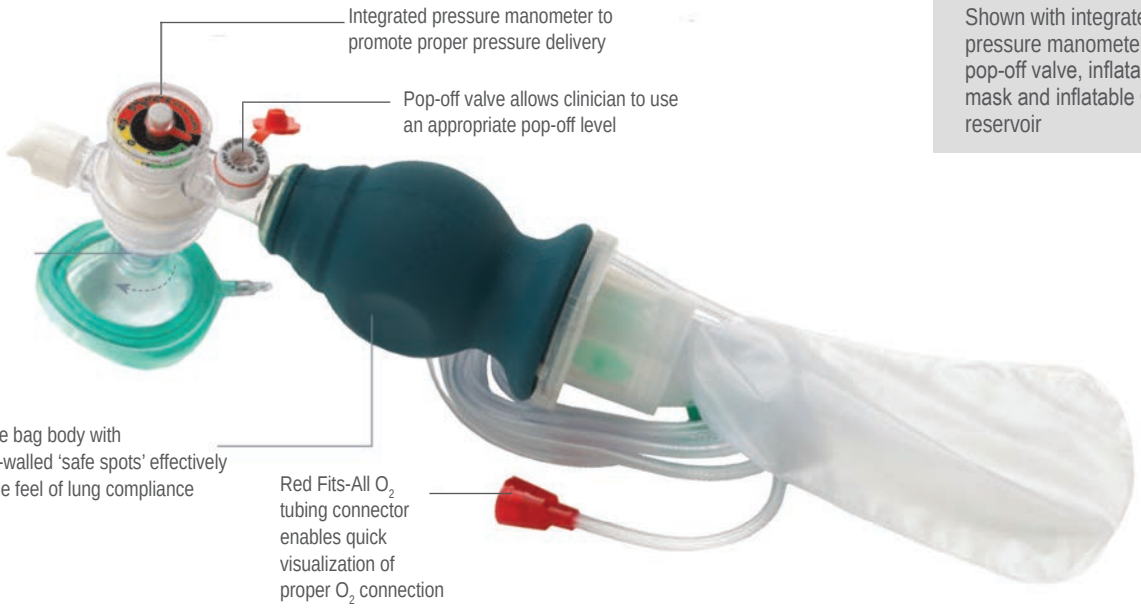
SunMed

Manual Resuscitator / Ventilator

SAFE SPOT

LATEX FREE | SINGLE PATIENT USE | DISPOSABLE

Ventlab



SafeSpot™
SS3200-Series
Shown with integrated pressure manometer, pop-off valve, inflatable mask and inflatable O_2 reservoir

SafeSpot™

- Single patient use resuscitation/ventilation system designed specifically for infant patients
- Bag features ultra-thin 'spots' to provide an enhanced tactile feel for lung compliance and increased patient safety
- Integrated pressure manometer promotes proper delivery (<20 cm H_2O) to guard against over-pressurization of babies' fragile lungs; the tri-color fields alert to the risk level of delivered pressure
- Accurate pressure delivery helps reduce barotrauma or pneumothoraces
- Pop-off valve (40 cm H_2O and 25 cm H_2O available) enables clinicians to use the pop off level appropriate for a given patient population creating a greater margin of safety for the baby
- Optional Vent Mask in various sizes available
- Select from a variety of components to assemble a custom resuscitation bag to meet your unique patient needs

ITEM#	SIZE	VOLUME	STROKE VOLUME	BODY MASS	PK
SS3200MB	Infant	250 mL	150-170 mL	≤ 10 kg (22 lbs)	10

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CUSTOMIZE YOUR MANUAL RESUSCITATOR

Choose from the following components to create a custom resuscitation/ventilation bag to best meet your needs:

SAFETY COMPONENTS

INTEGRATED PRESSURE MANOMETER

Ventlab's innovative color-coded dial clearly denotes pressure delivery:
Green -Target pressure level <20 cm H_2O
Yellow - Potentially dangerous pressure level
Red - Dangerous pressure level

POP-OFF VALVES

40 cm H_2O & 25 cm H_2O
Allows clinician to use an appropriate pop-off level

FILTERS

A bacterial/viral filter provides effective protection for the healthcare provider during expiration

CO_2 INDICATOR

Choose from STAT-Check II or MaxCap for effective assessment of CO_2 exchange

PEEP VALVES

Adjustable PEEP valves;
5-20 cm/H_2O

SafeSpotTM, SS3200-Series
Shown with integrated pressure manometer, pop-off valve, inflatable mask and corrugated tubing

SafeSpot™ bags come standard with an inflatable Vent Mask

OXYGEN RESERVOIRS

INFLATABLE O_2 BAG

Closed system oxygen reservoir delivers higher FDO_2 and provides visual indication of proper airflow

CORRUGATED TUBING

For use with secondary oxygen supply; available in 24" and 48" lengths

CONVENIENCE COMPONENTS

FACE MASKS

Inflatable and non-inflatable face masks available

FLEX NECK

Removable, flexible joint allows corrugated tubing
to be joined with the patient valve; also reduces the torque on ET tube

DISTRIBUTED BY:
ADVANCED SURGI-PHARM INC.
www.advancedsurgipharm.com
Tel.1-800-661-5432

INCA®
Infant Nasal CPAP Assembly

INCA® Infant Nasal CPAP Assembly is the most respected Continuous Positive Airway Pressure (CPAP) device among clinicians. INCA affords all the benefits of CPAP/Bubble CPAP for newborns in your care.

Features enhanced precision fit for neonates:

- Five anatomically proportional nasal cannula sizes for neonates
- Clear, extra-soft tubing provides custom shaping and maximal stability
- Chin strap is available to help prevent air leakage around the mouth
- Available in Complete and Replacement Sets

INCA COMPLETE SET

Consists of a nasal cannula, two lengths of Stay-Flex tubing, two tubing adapters, one in-line ''T" pressure adapter, a knit cap with hook/loop strap, two foam blocks and a hook/loop chin strap. One INCA Sizing Gauge is included in every box of five sets.

Item #	Description
44-2707	Set with 7.5 Fr Cannula (5/Box)
44-2709	Set with 9 Fr Cannula (5/Box)
44-2710	Set with 10.5 Fr Cannula (5/Box)
44-2712	Set with 12 Fr Cannula (5/Box)
44-2715	Set with 15 Fr Cannula (5/Box)

INCA REPLACEMENT SET

Includes the nasal cannula, two lengths of Stay-Flex tubing, two tubing adapters and one in-line pressure ''T" adapter.

Item #	Description
44-0707	Set with 7.5 Fr Cannula (5/Box)
44-0709	Set with 9 Fr Cannula (5/Box)
44-0710	Set with 10.5 Fr Cannula (5/Box)
44-0712	Set with 12 Fr Cannula (5/Box)
44-0715	Set with 15 Fr Cannula (5/Box)

INCA ACCESSORY PACK

Includes five knit caps with hook/loop strap, five chin straps with ten hook fasteners (not attached) and ten foam blocks.

1 Pack = 5 Hats and 10 Foam Blocks

Item #	Description
44-2001	X-Small Pack (5 XS Caps, 10 Foam Blocks)
44-2002	Small Pack (5 S Caps, 10 Foam Blocks)
44-2003	Medium Pack (5 M Caps, 10 Foam Blocks)
44-2004	Large Pack (5 L Caps, 10 Foam Blocks)

INCA NASAL SIZING GAUGE

For appropriate nasal prong fitting, use the INCA Sizing Gauge. Wipe gauge with sterile 70 percent isopropyl alcohol prior to each use. Hold the gauge up to the nasal area to determine appropriate cannula size.

Item #	Description
025-001	INCA Nasal Sizing Gauge (1/Pack)

NEO-fit™

Neonatal Endotracheal Tube Grip

CA CE

Facilitates Endotracheal Tube Management

The NEO-fit provides quick, secure endotracheal tube stabilization. Designed to firmly grip a Neonatal endotracheal tube, NEO-fit utilizes metal clips to mechanically grip the soft material of the tube. The device is positioned on baby's face using a hydrocolloid adhesive that is hypoallergenic and Hook / Loop strap that allows for rapid release and readjustment of the tube. MRI Conditional.

Item #	Description
42-2540	NEO-Fit Neonatal Endotracheal Tube Grip Set (20/Box) Each Set includes: (1) plastic tube grip, with hook/ loop strap, (2) foam foot pads, (2) foam "lollipop" tapes. Non-sterile.

NEO-prep™

Skin Barrier

CE

A must-have product for your CPAP patients. Protect their tender tissues during this critical therapy. Neo-prep Skin Barriers are precut and non-sterile.

Item #	Description
44-8000	Precut Hypoallergenic Skin Barrier, non-sterile, small (10/Box)
44-8001	Precut Hypoallergenic Skin Barrier, non-sterile, large (10/Box)

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ADVANCED SURGI-PHARM

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