ADVANCED INJECTION ARM
LF01121U & LF01126U
INSTRUCTION MANUAL
About the Simulator...

The Life/form® Advanced Injection Arm Simulator duplicates the human condition as closely as modern plastics technology allows—it is almost the real thing. Its care and treatment should be the same as with a patient; abuse or rough handling will damage the simulator—just as it would cause pain to a patient.

This unit is the simulation of the entire human arm from the shoulder to fingertips. Externally the skin texture is realistic to touch and the fingertips actually have fingerprints.

Although this arm will provide you long trouble-free usage, the skin and veins can be readily replaced when needed. The outer skin is easily peeled off revealing the “core” and veins providing, literally, a brand new arm. The life of the replaceable skin and veins will be prolonged by utilizing smaller needle sizes (such as 20- to 25-gauge). However, if instruction with larger needle sizes is required, this can be done; the skin and veins will merely be replaced sooner. The Skin and Vein Kits are available through NASCO (see list of supplies).

Supplies/Replacement Parts for Injectable Training Arm

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Cautions

1. This Synthetic Blood is specially formulated to be compatible with the self-sealing veins and plastics used in manufacturing the arm.
2. NEVER use Synthetic Blood for intramuscular injection.
3. DO NOT use dull or burred needles as these will cause leaks in the system. Burred needles will cause permanent damage. Use smaller needles (20- to 25-gauge).
4. DO NOT allow “blood” to dry on simulator—it may stain arm.
5. Use only 500 cc of Infusion Fluid as a larger amount will also increase the pressure of the venous system, resulting in leaks.
6. DO NOT clean the simulator with solvents or corrosive material as they will damage it.
7. NASCO Vein Tubing Sealant Kit (LF01099U) will extend the useful life of the tubing.

List of Components

1. 3 cc syringe with needle
2. 12 cc syringe with needle
3. 2 IV bags
4. Needle (butterfly)
5. 2 Pinch clamps
6. Small towel
7. Large towel
8. Infusion set (butterfly)
9. Intradermal sealant
Care of Simulator

After each class use, disconnect bags and return Synthetic Blood to storage container. Reconnect one IV bag to the system. Fill the bag with tap water and flush the venous system, allowing the open end to drain into a sink or basin. When the system runs clean, close the clamp and remove the IV bag. Excess water may be removed from the arm by raising the hand, lowering the shoulder, and draining it into a sink or basin. Wash outside of arm with Ivory liquid detergent and water. Always remove the metal pinch clamps from shoulder tubing and drain excess water from veins before storing.

Ordinary stains can be removed by washing with soap and warm water. Newsprint, similar printed paper or plastic will permanently stain the simulator if prolonged contact occurs. Stubborn stains may be removed with REN Cleaner (W09919U), simply by dispensing it on the area and wiping with a soft cloth or paper towel.

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Internal Structure

See Diagrams #1 and #2. (Both diagrams show the arm without the skin.)

Internally the vascular structure (rubber tubing) includes the cephalic vein, basilic, median, accessory cephalic, and meta-carpal. This venous system is constructed of special self-sealing rubber tubing with the lumen being the approximate size of a human vein. This vascular structure has an inlet tubing and an outlet tubing at the shoulder and it is via these tubes that the venous system is filled. Thus, the techniques of blood drawing and starting intravenous infusions may be practiced on the Advanced Injection Arm.

General Instructions for Use

The Advanced Injection Arm comes with all of the supplies necessary to perform most procedures.
E. INTRADERMAL INJECTIONS

Use a 3 cc syringe with a 25-gauge needle for this procedure.

Internal Structure

The arm features three spots for practicing intracutaneous injections. All are located on the outer aspect of the upper arm. (See Diagram #2.) If fluid is properly injected, a characteristic skin welt will form. The welt is removed by drawing the fluid after practice. Each site is reusable by dozens of students. We recommend you use distilled water as an injection fluid.

Procedures that can be Performed

Intradermal or intracutaneous injections involve the injection of small amounts of material into the substance of the skin. This procedure is used for diagnostic procedures, allergy tests, and administration of regional anesthetics.

A 25-gauge needle, ¼" to ½" long, is generally used and inserted at a 10° to 15° angle to the skin. Fluid is then injected to produce a small bleb just under the skin which causes a visible welt of the outer skin surface. Remove fluid from the welt by reinserting a needle without the syringe attached.

Care of the Intradermal Sites

Puncturing the skin with needles forms small slits or cuts which will eventually lead to deterioration. Should leakage occur, inject the supplied sealant fluid into the blister dot. Allow to set overnight before withdrawing excess fluid and using that site again.

A. PREPARING THE SYNTHETIC BLOOD

1. Add 1 pint of distilled water to the Synthetic Blood concentrate.
2. Be sure the clamp on the IV tubing is closed, and hang the bag no more than 18" above the level of the arm.
3. Attach the fitting end of the IV tubing to one of the shoulder tubes. (Make sure the arm is palm down at this point.)
4. With the other shoulder tube attached to the second supply bag, gradually “flush” the vascular system with Synthetic Blood by slowly opening the clamp. Allow some “blood” to pass through the system until the air bubbles have been eliminated. Close the clamp and then turn the arm over so it is palm up. Slowly open the clamp to allow some blood to pass through and to remove any remaining air that is trapped in the system.
5. Once the system is filled, close the clamp on the blood outlet tube. The venous system is now full of “blood” and pressurized. Be sure and leave the clamp on the inlet tubing opened.
6. The arm is now ready to practice drawing blood. “Blood” can be drawn anywhere along the pathway of the vein (see Diagram #1). Distilled water should be used to prepare the sites. Synthetic Blood will actually be aspirated once the vein is properly punctured.
7. Small diameter needles (20- to 25-gauge) should be used.
B. PREPARING THE ARM FOR INTRAVENOUS INFUSIONS

1. Close the tubing clamp at end of IV bag A, then fill with water (distilled water is recommended), and hang not more than 18” above the arm. (See Diagram #3.)

2. Appropriate intravenous infusion needles (or butterflies) should be used, and distilled water is recommended as an infusion.

3. The self-sealing simulated veins lend themselves very well to the practice of starting IV infusions, and IV’s can be started anywhere along the pathways of the simulated veins. Cleanse the sites with distilled water only.

4. Attach fitting end of the tubing from bag A into one of the shoulder tubing ends. (Make sure the arm is palm down at this point.)

5. Attach the other shoulder tubing end to fluid bag B, and “flush” the vascular system by opening both clamps. Allow infusion (water) to pass through the system until air bubbles are eliminated. Shut off the flow with a pinch clamp. Now turn the arm over so it is palm up. Slowly open the clamp to allow water to pass through and to remove any remaining air that is still trapped. Again, shut off the flow with the pinch clamp. The venous system is now full and pressurized.

6. Insert IV needle or butterfly in vein. “Flashback” will indicate proper insertion.

7. Close clamp on tubing from bag A and remove.

8. Attach needle or butterfly to tubing from bag B with latex adapter. Open clamp on tubing from bag B. (See Diagram #3.)

Proof of proper procedure will then be evidenced by the flow of infusion fluid from IV bag B. Control flow rate with clamp on tubing from bag B. This fluid can be used over. If a more realistic experience is desired with “blood flashback” instead of water when inserting butterfly into lumen of vein, use procedure C.

C. RECOMMENDED PROCEDURES FOR SIMULTANEOUS IV INFUSIONS AND DRAWING BLOOD

Use two IV Bag Kits:

Hook up and install as shown in Diagram #4 with IV bag A and IV bag B. Make sure the arm is lying palm down.

1. Begin with Synthetic Blood in IV bag A. Open clamp on both A and B to pressurize system. “Flush” system by allowing “blood” to flow into container B until bubbles in tubing disappear. Close the clamp on bag A and turn the arm over so it is palm up. Open clamp A and allow blood to flow until any remaining bubbles in the tubing disappear. Then regulate blood flow from bag A (using clamp). System is now full of “blood” and pressurized. “Blood” can now be drawn anywhere along the pathway of the vein.

2. Intravenous infusion—Insert butterfly into lumen of vein. Proof of correct insertion is evidenced by flashback of “blood.” Insert end of IV tubing into butterfly. Adjust flow to desirable rate with clamp. With this arrangement the IV bag B, when full, may be easily switched with A. NOTE: Always regulate flow of “blood” from bag on fluid supply stand, and open the other clamp.

D. INTRAMUSCULAR INJECTIONS

The procedure for administering intramuscular injections can be practiced in the area of the deltoid. Prep the site with distilled water only. These injections can be done utilizing the appropriate needle and syringe. One half cc of distilled water may be injected, however, we recommend utilizing air as injectant since the distilled water cannot be drained, but must evaporate from the arm. Synthetic Blood must NEVER be used for injections.
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