

SYMBIOS™ GoPump™ RAPID RECOVERY SYSTEM™

PRODUCT OVERVIEW

The SYMBIOS GoPump™ Rapid Recovery System is a complete postoperative infusion system that allows site-released local anesthetic to relieve pain that patients experience following a surgical procedure. The pump delivers 2 to 6 days, depending on reservoir size and flow rate, of analgesic pain medication to the post surgical site reducing or eliminating the need for narcotics after many surgical procedures.

The SYMBIOS GoPump™ Rapid Recovery System includes a gauge introducer needle with introducer catheter, your choice of an epidural medication catheter or a fenestrated medication catheter, infusion pump, connectors, 60cc and 3cc syringes, dressing, medication labels, DFU and patient information brochure. The GoPump System is an elastomeric-driven system with a 150ml or 300ml reservoir that allows the patient and physician to observe the progress of infusion. Pre-attached tubing, in-line filter, on/off clamp and flow restrictor make it simple to use. The system will deliver a total of 2ml/hr or 4ml/hr, depending on product type, of local anesthetic over an extended period. To confirm flow rate either check the medical label attached to the pump or look on the pump.



**If you have any questions or concerns at any time, call the
24-HOUR Patient Hotline at 1-866-844-5443 (Toll-Free)**

The SYMBIOS GoPump™ Rapid Recovery System is manufactured by



www.symbiosmedical.com

SYMBIOS™
GoPump™
RAPID RECOVERY SYSTEM™

QUICK REFERENCE GUIDE

- Using sterile technique, remove the kit contents from the pouch and place in a sterile field.
- Invert the pump and syringe, and push down on the plunger with both hands. Inject the physician prescribed fluid into the pump, filling the elastomeric membrane. Repeat previous steps to fill reservoir to the desired volume; max pump volume is 150cc of fluid.
- Attach fill port cap. Mark orange & white medication labels to indicate medication used. Peel and stick labels on the outside of the kit box could also be used for this purpose.
- Open white tubing clamp to purge all air from tubing to begin priming. Pull the clamp to the top of the pump and wrap orange medication label around the tubing to keep the clamp in place.
- Open catheter pouch. Remove end cap from catheter connector and discard.
- Remove sheath from introducer needle and discard. Draw up about 1 to 2 cc of sterile fluid with the smaller syringe and attach the catheter connector.

To fill the pump, complete the following steps:

- Close the white tubing clamp.
- With the large syringe, draw up approximately 60 cc of fluid. (CAUTION: Use approved techniques for removing medication from bottle so contaminants do not drop into fluid.)
- Remove all air from syringe and attach it securely to the fill port by screwing it on.

- Place introducer needle into the skin 3 to 5 inches from incision.
- Remove the needle leaving introducer in site.
- Thread the end of the catheter with the depth markings through the introducer into surgery site.
- Pull introducer over catheter to remove, leaving catheter within surgery site.
- Cover the catheter entrance site with the provided Tegaderm™ to secure the catheter to the skin.

- Advance the other end of the catheter into the compression sleeve of the connector that is attached to the smaller syringe (see #5) until it cannot be advanced any further (approx. 3 cm). Depress the top hinged piece of the connector until it clicks into place. There should be an audible click when this action is completed successfully.
- Inject medication to prime catheter and ensure medication is flowing freely through the catheter.
- Remove the small syringe from catheter connector and discard syringe. Remove cap from clear connector at the end of pump tubing and attach the catheter connector to the clear connector. ***Verify the clamp has been left OPEN so the medication will continue to flow.**
- Secure the pump to the patient by clipping it to the patient's gown/face bandage/dressing, or place it into the Go Pump carrying pouch.

Important: The catheter should be primed immediately prior to connecting to the connector at the end of the pump tubing. (In #12)

If alternative connector is used, hold in place and tighten connector around catheter as tightly as possible.

When the elastomeric membrane is no longer distended infusion is complete. Disconnect and dispose of pump. If instructed by your physician, the catheter can be removed by gently pulling from the skin. Verify the tip is either blue or black, indicating that the entire catheter has been removed.

While using the SYMBIOS GoPump™ Rapid Recovery System:

POST OPERATIVE CARE

- Access the patient's pain score and provide pain medication per the physician's orders.
- Make sure the puncture site is covered with the Tegaderm™ dressing provided and the clamp(s) on the pump is/are open.
- Ensure medication label is attached.
- Secure the pump to the patient with the built-in clip or pouch.
- If the pump should fall, stop the medication flow by pinching off the tube with the clamp and call the physician.
- Provide the patient with the Patient Information brochure.
- Do not get the pump wet. When taking a shower, place the pump outside the shower or cover with a plastic bag.

DURING THE INFUSION

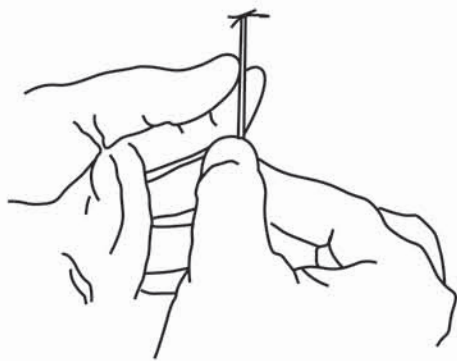
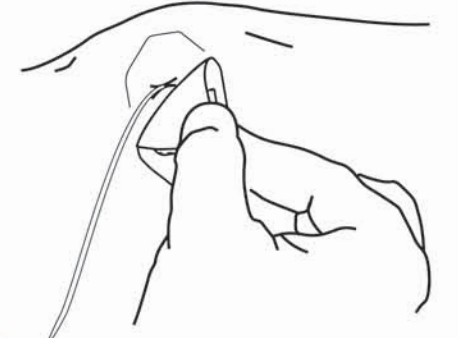
- The SYMBIOS GoPump™ Rapid Recovery System will infuse a pre-determined rate of local anesthetic into the wound site via the small catheter that was implanted during surgery.
- Occasionally check the medication levels to ensure the pump is working. The tan colored "balloon" visible inside the plastic housing will shrink over time indicating the flow of medication. Please note that the rate of change is so slow that you will not be able to watch it move. The medication will be fully dispensed when the "balloon" becomes visibly flat on all sides, appearing like a thick pencil. Sometimes all sides are not evenly flat, but this is normal and not cause for alarm.


END OF INFUSION

- Close off the clamp when medication is fully dispensed
- Dispose of the pump using institution's policy
- The SYMBIOS GoPump™ Rapid Recovery System is a single patient use device and CANNOT be refilled.

REMOVAL OF THE CATHETER

If your physician has instructed you to remove the catheter when your medication runs out, then follow these simple instructions:

1. Remove the dressing/bandage that covers where the catheter enters the puncture site.
 
2. Hold the catheter close to the skin and begin a gentle pull. Continue pulling until it is completely out of the body. It should be easy. Do not cut or pull hard to remove the catheter, as it may stretch or break. If you have any questions or the catheter is difficult to remove, please call the physician.
 

3. After the catheter is removed, inspect the tip of the catheter to see that it is dark blue or black. This is to verify that the complete catheter has been removed.
 

Product Duration Table

Product	Reservoir Volume	No. of Catheters	Flow Rate	Infusion Time	Standard Epidural Catheter	Fenestrated 2.5" Catheter	Fenestrated 5" Catheter	Fenestrated 10" Catheter	Units Per Case
GO Pump Single	150ml	1	2ml	3 days	S150-E0002x1	S150-F0252x1	S150-F0502x1	S150-F1002x1	5
GO Pump Dual	150ml per side	2	2ml	3 days	D300-E0002x2	D300-F0252x2	D300-F0502x2	D300-F1002x2	5
GO Pump w/ Y-connector (2ml)	300ml (150ml/ side)	1	2ml	6 days	S300-E0002x1	S300-F0252x1	S300-F0502x1	S300-F1002x1	5
GO Pump w/ Y-connector (4ml)	300ml (150ml/ side)	1	4ml	3 days	S300-E0004x1	S300-F0254x1	S300-F0504x1	S300-F1004x1	5

TROUBLE SHOOTING

Keep the clamp(s) open unless instructed by the physician

- Make sure the tubing is not kinked
- Make sure the filter is not taped down or covered
- Confirm system luer locks are tight

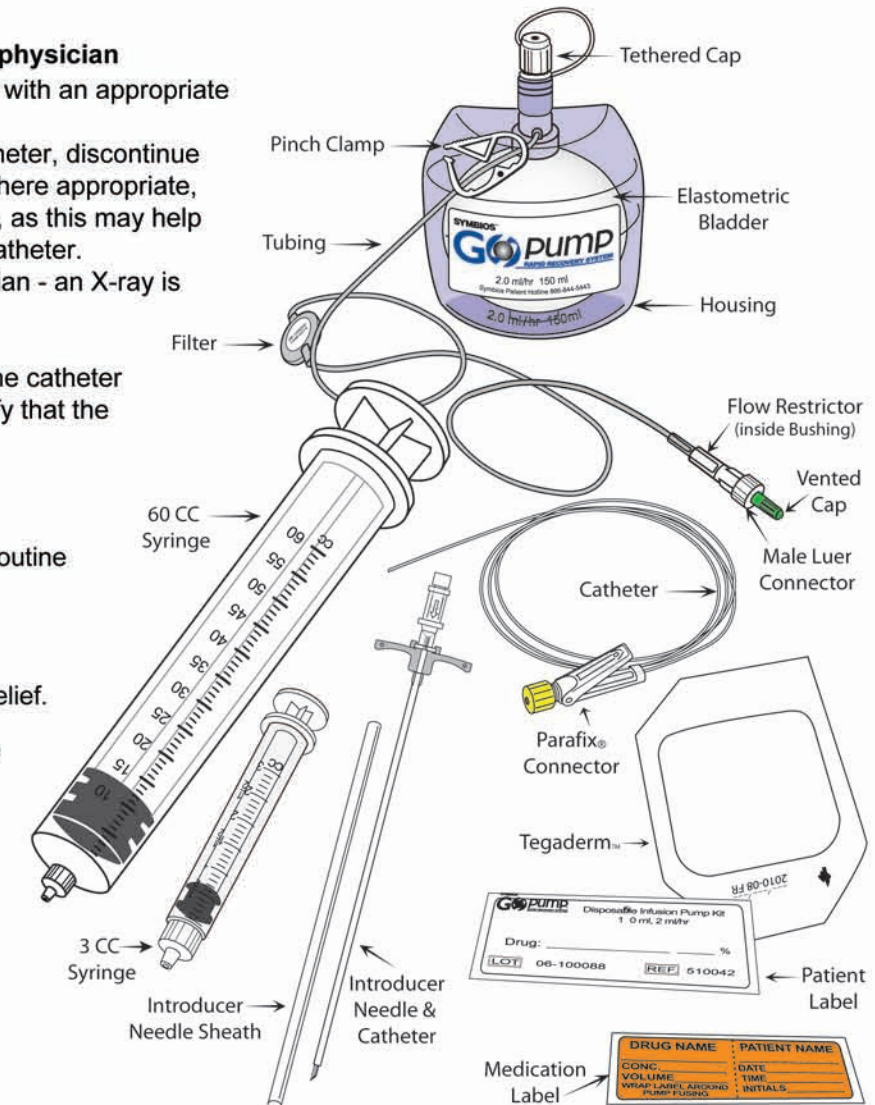
CAUTIONS

Keep the clamp(s) open unless instructed by the physician

- Ensure that the catheter puncture site is covered with an appropriate dressing.
- If you feel any resistance while removing the catheter, discontinue pulling as the catheter could break or stretch. Where appropriate, you may apply warm compresses for 10 minutes, as this may help with easier removal. Then try again to remove catheter.
- If catheter is still difficult to remove, notify Physician - an X-ray is recommended.
- Do not cut catheter.
- After the catheter is removed, inspect the tip of the catheter to see that it is dark blue or black. This is to verify that the complete catheter has been removed.

PATIENT ASSESSMENT

- Assess and monitor vital signs per physician routine order postoperatively.
- Notify Physician if:
 - * If patient is experiencing inadequate pain relief.
 - * Redness, swelling, pain or discharge at the catheter site.
 - * Hypotension, palpitations, bradycardia, restlessness, seizure activity, itchiness, anxiety, nausea & vomiting, metal taste in mouth, dizziness, ringing in ears.
- Patients may experience loss of feeling at and around the surgical area. Take proper measures to avoid patient injury.



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