TIP SHEET: SHIELD CLEANING AND MAINTENANCE

For use with: Aero/Vent[™] shield #AV-401, #AV-501, #AV-501A Aero/Vent[™] Jr. shield #AV-101, #AV-102, #AV-101A Insta/Vent[™] shield #IV-601, #IV-601A

1. Shield surfaces are non-porous. To avoid possible surface contamination, gently wipe down the exterior and internal walls of the shield with rubbing alcohol or other disinfectant and let air dry. This should be done following every procedure. **NOTE:** Placing the shield on absorbent paper will also help to protect surfaces and may be discarded as hazardous waste following a procedure.

2. Medi/Nuclear's[®] radioaerosol delivery systems are closed systems with fully disposable kits. Patient exhalation is directed into a HEPA filter, with 99.9% trapping efficiency. Internal portions of the shield such as the nebulizer, internal pressure port (used in some models) or oxygen inlet port will not be contaminated with proper use of kit.

3. Replacement of oxygen tubing is recommended every 3-4 months or according to facility protocol. Medi/Nuclear's[®] oxygen tubing has special connectors with small internal diameter to attach snugly to the shield, whereas tubing from other suppliers or Central Supply may be oversized and potentially allow leakage. Replacement oxygen tubing may be ordered from Medi/Nuclear[®] using part number IV-605.

4. In rare instances, the small orifice inside the pressure port (in Aero/Vent[™] Jr. and Insta/ Vent[™] shields only), can become partially occluded, creating higher than normal backpressure. To ensure free air flow, remove the oxygen tubing from the shield and blow air through the pressure port from inside of the shield. If necessary, the shield may be taken to the Biomed Department where a higher PSI is available and/or warm water may be blown through the pressure port.

> For additional information or troubleshooting tips, please contact us. We're here to be of assistance!



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800.321.5981 / 626.960.9822

info@medinuclear.com / www.medinuclear.com 4610 Littlejohn Street, Baldwin Park, CA 91706







Tips for Techs Rev A