

THORA-VENT[®]

PATIENT/NURSING INFORMATION

The THORA-VENT has been designed for the treatment of spontaneous, traumatic or iatrogenic pneumothorax.

1. The self-sealing, self-contained device should be in direct contact with skin. No part of the catheter should be visible. An airtight seal must be maintained to prevent subcutaneous emphysema.
2. Do not adjust the position or remove the THORA-VENT under any circumstances.
3. The red signal diaphragm deflects upward when the pressure in the pleural space is positive ($> 2\text{mm Hg}$). The diaphragm deflects downward when the pressure is negative ($< 2\text{mm Hg}$). The normal intrapleural pressure is constantly negative. Therefore, when the diaphragm stays in the downward position, the pneumothorax may be resolved. Notify a physician.
4. Using a stethoscope, one should be able to hear normal breath sounds on the affected side as the lung is re-expanded. Any absence of breath sounds can indicate a failure of lung re-expansion. Notify a physician.
5. Avoid direct contact with water as in showering or bathing.
6. Notify the physician if accumulation of excessive blood or other liquid is observed in the device. The device is not designed for treatment of hemothorax. If small amounts of naturally occurring fluid accumulate in the device, the fluid can be removed via the drainage port on the bottom of the device using a syringe.
7. If skin irritation is observed, notify a physician.
8. Cap the self-sealing port when not in use.
9. Do not disinfect the THORA-VENT with alcohol (propanol). Alcohol will degrade the THORA-VENT.
10. Always clamp the suction tubing set when suction is not being applied.



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