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**BALLARD\* LIBERATOR  
ET TUBE CLEARING SYSTEM  
FOR ADULTS**

**Instructions for Use**



Lock Symbol  Device Locked

Wiper Symbol  Wiper can be activated with red button

Suction Symbol  Suction can be activated with white button.

## General Instructions for Use

These instructions apply to: BALLARD® Liberator ET Tube Clearing System.

### Indications:

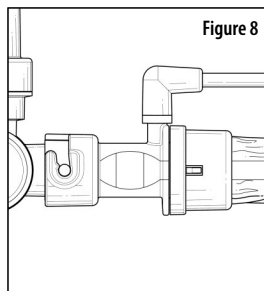
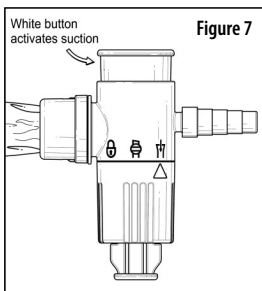
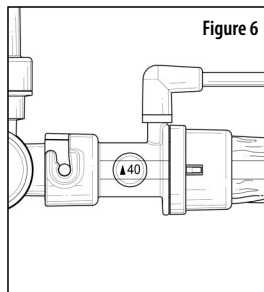
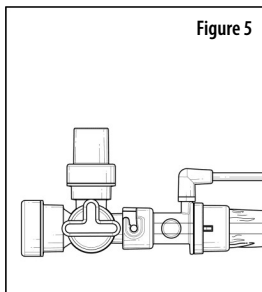
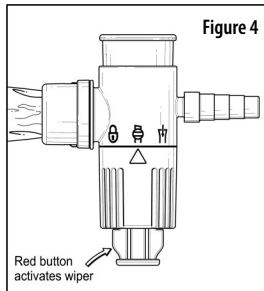
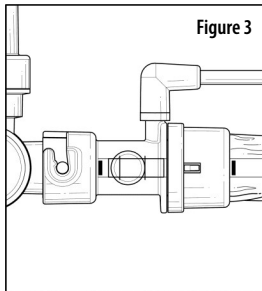
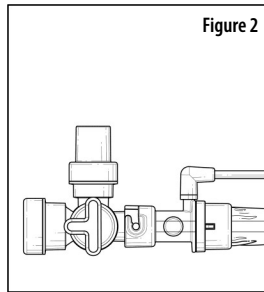
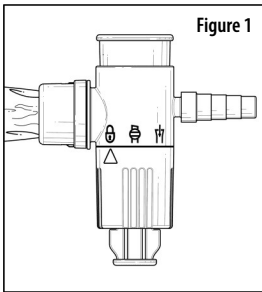
The BALLARD® Liberator ET Tube Clearing System is a single patient use closed system for the removal of secretions from the endotracheal tube of ventilator dependent adult patients.

### ⚠ Warnings

1. Do not cut or trim the endotracheal tube (not supplied) while the BALLARD® Liberator ET Tube Clearing System is attached, otherwise the BALLARD® Liberator ET Tube Clearing System may also be cut and a portion of the catheter could be aspirated into the lower respiratory tract and may cause death or serious injury.
2. Do not reuse or reprocess this medical device. Reuse or reprocessing may: (a) adversely affect the known biocompatibility of the device, (b) compromise the structural integrity of the device, (c) lead to the device not performing as intended, (d) create a risk of contamination and cause the transmission of infectious diseases resulting in patient injury, illness or death.

### ⚠ Cautions

1. Single patient use only.
2. Rx only.
3. Use with the Parker Medical Flex-Tip® or EasyCurve™ is not recommended due to the possibility of difficulty passing the BALLARD® Liberator ET Tube Clearing System past the curved tip and two Murphy eyes.
4. Inspect BALLARD® Liberator ET Tube Clearing System package for signs of damage. Do not use if packaging has been compromised. Nonsterile contents may cause infection.
5. Assure control handle is in the locked position to prevent inadvertent activation. (Figure 1)
6. Assure manifold stopcock is open only to the ventilator. (Figure 2)
7. BALLARD® Liberator ET Tube Clearing System is intended to be used for 72-hours before changing. Change more frequently if catheter becomes heavily soiled during use.
8. Do not use on tracheostomy patients.
9. The catheter length when used on recommended sized ETT does not allow insertion more than 6 cm past the end of the ETT which is never recommended and may cause injury if the wiper is inflated beyond that depth.
10. Do not leave the catheter in the airway. Always pull back until the two black stripes (at the tip and proximal to the wiper) are visible on the proximal side of the stopcock in the cleaning chamber and in the sheath simultaneously. (Figure 3) Any catheter left in the airway or manifold will increase airway resistance and may be damaged by closing the stopcock.
11. Use appropriate wiping levels (normally -10.7~-19.9 kPa [-80 ~ -150 mmHg])
12. Use appropriate vacuum technique. Most experts suggest limiting duration of entire procedure to 10-15 seconds and each wiping episode to no more than 5-8 seconds.



 Diameter	 Length	 Single Use Only	 STERILE EO	 Do not use if package is damaged
 Do not resterilize	 Not made with natural rubber latex	Rx Only	 Caution	 Consult instructions for use

13. Deep suctioning is not recommended and may cause mucosal injury.
14. Do not use suction or wiping if there are signs of patient intolerance, such as oxygen desaturation or significant stress or discomfort. As needed, use the Wiper Only method for endotracheal tube clearing.
15. BALLARD\* Liberator System Manifold is intended to be changed PRN, but not exceed the life of the ventilator circuit indicated by hospital guidelines or 28 days.

## Set Up

1. Assure endotracheal tube is securely attached to the patient and note the centimeter markings at the teeth or lip.
2. Using gloves and eye protection, carefully open the sterile package in a clean manner.
3. Attach the distal manifold port to the endotracheal tube universal adapter and the side port of the manifold to the ventilator. Verify stopcock is fully open to the ventilator only. **(Figure 2)**  
 ⚠ **Caution:** Do not use extreme force to connect to the ETT.
4. Attach suction tubing to control handle suction connector.
5. Leave the control handle in the locked position **(Figure 1)** and adjust vacuum regulator to desired level.
6. Rotate control handle lock to wiper position **(Figure 4)**, depress wiper actuator (red button) and verify wiper inflation (visible through the saline infusion section of the manifold). **(Figure 8)**
7. Rotate control handle lock to the locked position.

## Wiping Procedure

1. Open stopcock on manifold to the catheter position. **(Figure 5)**
2. Holding manifold and endotracheal tube with one hand, carefully push the catheter into the ETT.
3. Advance catheter to the appropriate depth marking on the catheter that matches the depth markings on the ETT. Once the catheter has been properly positioned, the centimeter marking on the catheter that is easily visible through the wall of the irrigation chamber can be noted and subsequently used for proper catheter positioning during wiping procedure. **(Figure 6)**
4. Rotate lock on control valve to wiper position. **(Figure 4)**
5. Holding manifold and endotracheal tube with one hand, carefully push the catheter into the ETT.
6. Advance catheter to appropriate depth marking on the catheter that matches the depth markings on the ETT.
7. Depress wiper actuator and gently withdraw (3-5 seconds) until black rings are visible inside cleaning chamber and sleeve. **(Figure 3)**
8. Rotate stopcock on manifold to ventilator only position. **(Figure 2)**
9. Perform Catheter Rinsing (Irrigation) procedure.

## Catheter Rinsing (Irrigation) Procedure

1. Assure stopcock on manifold is in ventilator only position. **(Figure 2)**
2. Open cap on irrigation port.
3. Insert 15 cc saline vial or 15 cc slip tip syringe filled with saline into the irrigation port.
4. Rotate lock on control handle to suction **(Figure 7)** and depress suction control valve until catheter and cleaning chamber are clean or vial or syringe is empty. The saline vial may need to be squeezed, or the syringe injected to utilize all the saline available for the rinsing procedure.
5. Repeat as needed.
6. Rotate lock on control handle to locked position. **(Figure 1)**

## Adapter

1. Refer to instructions for use for BALLARD\* Liberator Closed Suction ET Tube Clearing System Adapter.
2. Carefully open the sterile Adapter package using clean technique.
3. Assure stopcock on manifold is in the ventilator only position. **(Figure 2)**
4. Carefully disconnect catheter from manifold rotating counter clockwise. Avoid leaving device/accessory disconnected from manifold for prolonged period of time.
5. Using cap from Adapter, place cap on catheter (clockwise twist). Set catheter aside.
6. Carefully connect Adapter to manifold.
7. Open stopcock on manifold to catheter side. **(Figure 5)**
8. Perform bronchoscopy, BAL or other catheter-based diagnostics and/or therapeutics as required.
9. Once the inserted device/catheter has been pulled back to where the tip of the device is visible proximal to the stopcock, rotate stopcock on manifold to ventilator only position. **(Figure 2)**
10. Perform Catheter Rinsing (Irrigation) procedure as device allows or is required. (For example, to clean the tip of the bronchoscope before it would be reintroduced into the tracheobronchial tree.)
11. When Adapter procedures are complete, assure stopcock is in the ventilator position and carefully disconnect Adapter from manifold.
12. Remove cap from BALLARD\* Liberator Closed Suction Catheter and carefully reconnect catheter to manifold.

## Replacement Catheter


1. Stabilize the artificial airway and manifold with one hand.
2. Assure stopcock on manifold is in the ventilator only position. **(Figure 2)**
3. Disconnect catheter by rotating counter-clockwise.
4. Remove cap on replacement catheter and attach to manifold. Rotate until an engagement or click is felt.



## Day Sticker Usage

1. BALLARD\* Liberator Closed Suction Catheters are intended for use over a 72-hour period.
2. Day use stickers are provided as a convenience to alert when the device should be replaced.
3. As an example, if the device is installed on a Tuesday, the Friday sticker should be placed on the suction control valve.
4. It may be of benefit to replace the entire system more frequently if visible and irremovable soiling of the manifold is observed.

⚠ Not recommended for use with Parker Medical Endotracheal Tubes. Store in a cool dry place.

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