

DISPEN^{SYR}TM



FLUSH

pre-filled syringe with
0.9% NaCl

Reduce complication risks and cut flushing time!



PRODUCT DESCRIPTION

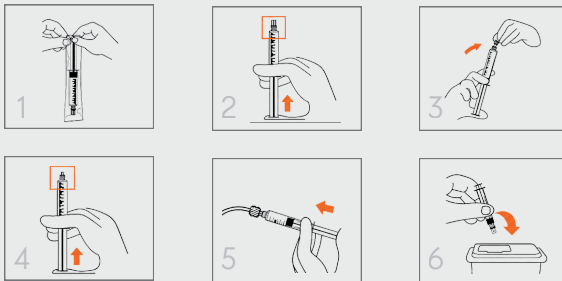
Flushing is an important step in maintaining intravenous access. In addition to flushing, locking is also an essential component to prevent occlusions. The standard method for flushing IV catheters comes with an increased risk of complications, such as CRBSI (Catheter Related Blood Stream Infection)¹ and needle stick injuries².

Pre-filled syringes with 0.9% NaCl offer safety because firstly, the risk of CRBSI is reduced, and secondly, needle stick injuries are a thing of the past. For flushing, needles are no longer required, thereby eliminating a significant risk of infectious diseases^{3,4}. Internationally accepted recommendations regarding vascular access strongly recommend the use of pre-filled syringes⁵.

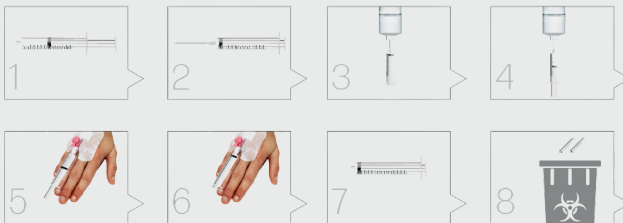
Reducing the risk of CRBSI is highly relevant, as approximately 40% of all healthcare-associated bloodstream infections are catheter-related⁶, and the average cost of a catheter-related infection is around €3,500 per patient⁷.

IMPROVED WORKFLOW

Flushing procedure with the Dispensyr™ FLUSH



Old flushing procedure with separate syringe and needle



1. Austin, P., Elia, M. (2013). Improved aseptic technique can reduce variable contamination rates of ward-prepared parenteral doses. *J Hosp Infect.* Feb;83(2):160-3.
2. Journal of Infusion Nursing. (2016). Infusion Therapy Standards of Practice. Supplement to Jan/Feb, Vol.39(1S).
3. Bertoglio, S., Rezzo, R., Merlo, F.D., Solari, N., Palombo, D., Vassallo, F., Beltrami, S., DeMaria, A. (2013). Pre-filled normal saline syringes to reduce totally implantable venous access device-associated bloodstream infection: a single institution pilot study. *J Hosp Infect.* May;84(1):85-8.
4. Bouya, S., Balouchi, A., Rafiemanesh H, et al. (2020). Global Prevalence and Device Related Causes of Needle Stick Injuries among Health Care Workers: A Systematic Review and Meta-Analysis. *Ann Glob Health.* Apr;86(1):35.
5. Infusion Nurses Society. (2021). Infusion Nursing Standards Practice. *J Infus Nurs.*
6. Loveday, H.P., Wilson, J.A., Pratt, R.J., Golsorkhi, M., Tingle, A., Bak, A., Browne, J., Prieto, J., Wilcox, M. (2014). National evidence-based guidelines for preventing healthcare-associated infections in NHS hospitals in England. *J. Hosp. Infect.* 86 Suppl 1:S1-S70.
7. Rosenthal, V.D., Udawadia, F.E., Kumar, S., Poojary, A., Sankar, R., Orellano, P.W., Durgad, S., Thulasiraman, M., Bahirune, S., Kumbhar, S., Patil, P. (2015). Clinical impact and cost-effectiveness of split-septum and single-use prefilled flushing device vs 3-way stopcock on central line-associated bloodstream infection rates in India: a randomized clinical trial conducted by the International Nosocomial Infection Control Consortium (INICC). *Am J Infect Control.* Oct 1;43(10):1040-5.

THE BENEFITS AT A GLANCE



Lowers the CRBSI risk

A study found that 2-17% of manually prepared flush syringes by nurses were contaminated with microorganisms⁸. The DispenSyr™ FLUSH pre-filled syringes are ready-to-use, minimizing the risk of contamination and potentially reducing the risk of CRBSI.



Improves efficiency in the workflow

The task of drawing up 0.9% NaCl into syringes is an additional and unnecessary task for nurses and opens the door to serious violations of infection prevention procedures⁹ and ergonomic employer practices. The DispenSyr™ FLUSH pre-filled syringes are ready to use, which limits the number of steps, reduces the risk of errors, and saves time⁹.



Reduces medication errors

A pre-filled syringe has the potential to promote the practical implementation of clinical protocols and guidelines regarding intravenous flushing. Automatic labeling reduces the risk of medication errors⁹. The DispenSyr™ FLUSH pre-filled syringes are pre-labeled and provided with the necessary information, which can reduce the risk of medication errors.



Prevents damage to catheters

The syringe diameter affects the pressure generated during flushing. With the same force on the plunger, a syringe with a smaller diameter can generate higher pressure than one with a larger diameter, increasing the risk of catheter damage when resistance is encountered. Therefore, a syringe with a barrel diameter of at least a 10 mL syringe is recommended¹⁰. The DispenSyr™ FLUSH syringes have a 10 mL diameter in all 3, 5, and 10 mL versions. In the 20 mL version, the diameter is even larger to further minimize the aforementioned risk.



Eliminates the risk of needlestick injuries

According to the WHO, more than 2,000,000 needle stick injuries occur annually among approximately 35 million healthcare professionals. The DispenSyr™ FLUSH pre-filled syringes offer safety to these professionals because the need to use needles is eliminated.



Achieves structural time savings

It has been demonstrated that the use of a pre-filled syringe results in a significant time reduction (22 to 39 seconds per flush). This contributes to a significant reduction in the total time required for flushing (a reduction of 35 to 64 seconds). In a clinical setting, a time saving of one minute per flush procedure means a time saving of approximately 10 minutes per patient per day based on five flush moments per day, depending on frequency.⁹



Avoids VOC leakage

Pre-filled syringes are associated with disturbances in taste and smell due to substance leakage caused by the sterilization method used. These disturbances can be significant enough to affect appetite and induce nausea¹¹. The DispenSyr™ FLUSH pre-filled syringes are sterilized using gamma radiation, which prevents the leakage of Volatile Organic Compounds (VOCs) and ensures an absence of odor.



Now also in 20 ml: a more sustainable option with the same benefits

Choose smart and sustainable: one DispenSyr™ FLUSH 20 ml replaces two 10 ml syringes and reduces syringe and packaging material by 50%.

8. Hadaway, Lynn. (2006). Flushing vascular access catheters: Risks for infection. Infection Control Resource, Vol.4(2).

9. Keogh, S., Marsh, N., Higgins, N., Davies, K., Rickard, C. (2014). A time and motion study of peripheral venous catheter flushing practice using manually prepared and prefilled flush syringes. J Infus Nurs. Mar-Apr;37(2):96-101.

10. Goossens, G. A. (2015). Flushing and Locking of Venous Catheters: Available Evidence and Evidence Deficit. Nursing Research and Practice, 2015, 985686

11. Hamze, B., Vaillancourt, R., Sharp, D., Villarreal, G. (2016). A Comparison of Taste and Odor Perception in Pediatric Patients Receiving a 0.9% Sodium Chloride Flush From 2 Different Brands of Prefilled 0.9% Sodium Chloride Syringes. J Infus Nurs. Jan-Feb;39(1):18-24.

ORDER INFORMATION



Product code	Volume	Type	Packing unit	Outer packaging
520410	3 ml	Single sterile (SS)	BOX/30	24 x BOX/30
520411	5 ml	Single sterile (SS)	BOX/30	16 x BOX/30
520412	10 ml	Single sterile (SS)	BOX/30	16 x BOX/30
520416	20 ml	Single sterile (SS)	BOX/20	12 x BOX/20
520413	3 ml	Double sterile (DS)	BOX/30	8 x BOX/30
520414	5 ml	Double sterile (DS)	BOX/30	8 x BOX/30
520415	10 ml	Double sterile (DS)	BOX/30	8 x BOX/30
520417	20 ml	Double sterile (DS)	BOX/20	12 x BOX/20

Scan this QR code to visit the
product page for more
information:



Version number: 1.0

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