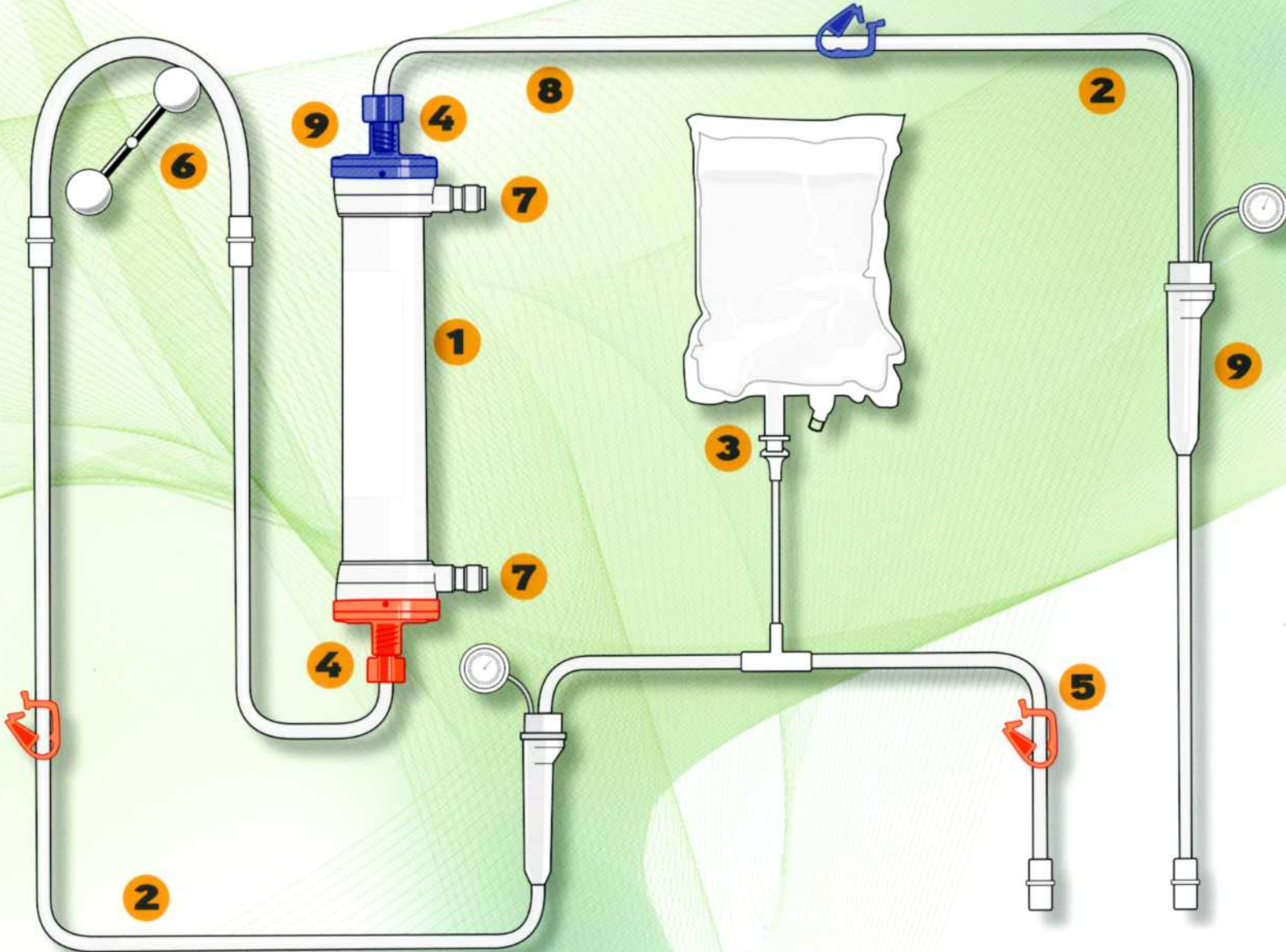




# PRIMING ASAHI DRY-TYPE DIALYZERS



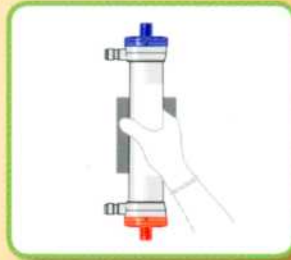
IT IS IMPORTANT TO REMEMBER THAT THIS DIAGRAM IS INTENDED TO BE USED AS A QUICK REFERENCE GUIDE. PLEASE REFER TO THE IFU ENCLOSED IN EACH CARTON OF DIALYZERS FOR MORE DETAILED INFORMATION.

IT IS IMPORTANT TO USE ASEPTIC TECHNIQUE THROUGHOUT THIS PROCEDURE.

## PRIMING PROCEDURE

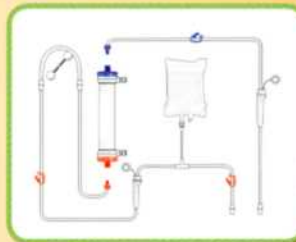
### STEP 1

Position the dialyzer on the machine with the venous header (blue) up.



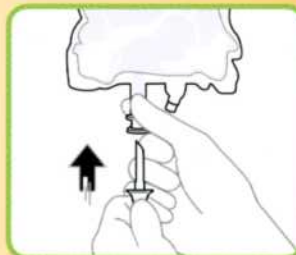
### STEP 2

Place arterial and venous bloodlines on the machine according to manufacturer's IFU. Close all small clamps.



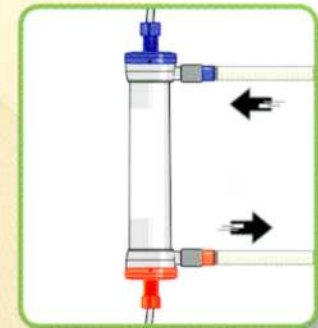
### STEP 3

Connect 1-liter bag of 0.9% saline to the I.V. administration set. Note: Saline volume may be determined by unit policy.



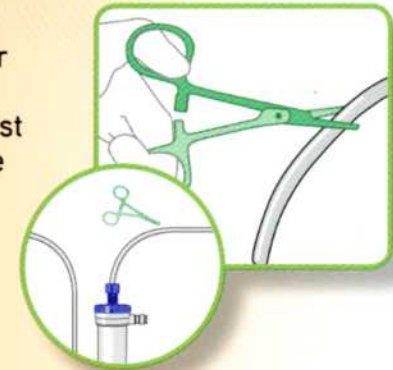
### STEP 7

Attach dialysate lines to the dialyzer and begin dialysate flow with minimum UF.



### STEP 8

Briefly pinch and release either the arterial or venous blood tubing near the dialyzer to assist in purging residual air from the fibers. (This process may be continued throughout the priming process until air fails to accumulate in the header.)



### STEP 9

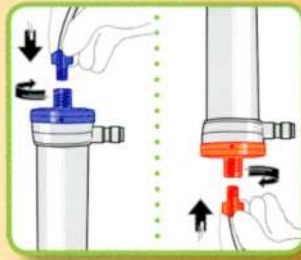
GENTLY tilt and tap the venous





#### STEP 4

Aseptically attach both arterial and venous bloodlines to appropriate dialyzer connector. (Arterial is color-coded red and venous is color-coded blue.)

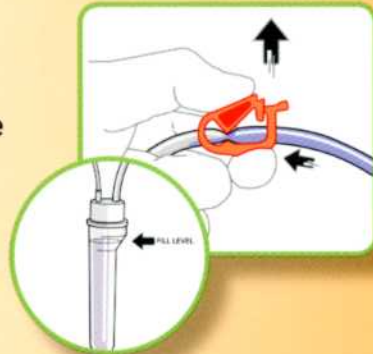


dialyzer header to remove accumulated air. (Remember that it is possible to remove air only when the dialyzer is in the venous header up position.)



#### STEP 5

Open saline clamps and allow patient end of arterial line to fill with saline by gravity. Please note that all drip chambers should be maintained at approximately  $\frac{3}{4}$  full depending on manufacturer's IFU. Close bloodline arterial tubing clamp.



500ml

#### STEP 10

Continue priming process until 1000ml total saline has passed through the dialyzer and no further air can be removed. Note: Saline volume may be determined by unit policy. If air bubbles remain, continue priming with additional saline until clear. Replace empty saline bag.

#### STEP 11

This completes priming of the Asahi dry-packed dialyzer. Treatment may begin, or, if it is normal unit procedure, it is possible to recirculate saline until treatment begins by connecting the patient ends of the arterial and venous bloodlines, opening the saline clamp and resuming blood pump at a slow rate. As treatment begins, dialyzer may be rotated arterial end up.

#### STEP 6

Open all necessary clamps and start blood pump at slow flow rate (approximately 100ml/min) to prime arterial bloodline, dialyzer and venous bloodline. Be sure to fill drip chambers (if present) to appropriate levels to avoid saline-air mix in bloodline. Ensure that all air is removed from blood pump segment.

