### Yes. It can.

#### **Dressing Innovation – Simplifying UGPIV**

UltraDrape<sup>®</sup> was engineered to facilitate a user-friendly, aseptic, no touch procedure while...

- Minimizing securement failure
- Offering a streamlined approach to barrier and securement without compromising on efficacy
- Reducing procedure cost when compared with use of a sterile gel and sterile cover
- Facilitating Standard-ANTT<sup>®</sup>
- Eliminating time-consuming clean up



Ultrasound gel applied to removable film layer for target vessel identification

Manufactured with a film layer which provides an effective barrier against all viruses and bacteria as small as 20nm

Bifurcated, "stand-alone" design prevents gel from reaching the IV site while enabling seamless catheter insertion and securement

## **ULTRA DRAPE**<sup>®</sup>

UGPIV Barrier and Securement

The uniquely designed, sterile, dual-action barrier and securement dressing for use during UGPIV procedures.

UGPIN	Borrier and Securement	 
	Workd's First Barrier And Securement Dressing - Enables 'no-foxf' aspitic UGPV procedure - Eliminates secondary classing procedures - Quispred to facilitate an easier UGPV procedure - Not made with natural nubber lates \$0 UitraDrape Dressings	

Product Number	Package Size
34-15	5.8" x 3.25" (14.72cm x 8.25cm), Box of 50, 4 bx/cs



#### **FEATURES:**

#### ▶ STERILE

- ▶ UltraDrape<sup>®</sup> is manufactured with a film layer which provides an effective barrier against all viruses and bacteria as small as 20nm.
- Not made with natural rubber latex
- Single dressing as barrier and securement
- ASAP-approved for facilitating Standard-ANTT®

#### parkerlabs.com/ultradrape

#### Parker Laboratories, Inc.

The sound choice in patient care.™

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INTRODUCING



The world's first sterile barrier and securement dressing uniquely designed for UGPIV



UGPIV has been shown to improve IV success rates, decrease the number of percutaneous punctures and decrease the time required to achieve IV access.<sup>1</sup>

However, cleaning ultrasound transmission gel from the patient prior to IV securement takes considerable time when done correctly. Inversely, inadequate removal of transmission gel may lead to securement dressing failure, requiring more frequent dressing changes. Research indicates contamination rates increase with the frequency of dressing changes.<sup>2</sup>

Can a dressing be designed to mitigate securement failure and maximize cost and time efficiencies?

1. Bagley, WH, et al. Focus on: Dynamic Ultrasound-Guided Peripheral Intravenous Line Placement website viewed at https://www.acep.org/Clinical---Practice-Management/Focus-On--Dynamic-Ultrasound-Guided-Peripheral-Intravenous-Line-Placement/ Published August 2009. Accessed August 17, 2017.

2. Bernatchez, S. Care of Peripheral Venous Catheter Sites: Advantages of Transparent Film Dressings Over Tape and Gauze viewed at http://www.avajournal.com/article/ S1552-8855(14)00161-5/fulltext?cc=y= Published December 2014, Volume 19 Issue 4. Accessed August 14, 2017.

#### **Application Instructions**



Assess location of the target vein using ultrasound, and most importantly, mark the site. Clean and disinfect skin to your facility's protocol. Before applying UltraDrape, position the dressing with blue tab towards you and pull away white paper.  $\mathbf{1}$ 



Carefully grasp the rear blue tab. 2Pulling from the side, remove gel layer and discard.



Bring the non-adherent sides together by folding dressing and holding at the tabs. Center the folded dressing at your **marked** target vein, then press and adhere the dressing's rear half (the portion without the split) on the skin. The lower half with the split will stand upright and away from the skin and the target insertion site.

While holding two fingers on the adherent side of the dressing, grasp the blue tab. 31 at the top of the split portion. Pull the tab up and off, and once removed, set aside the release film with the supplied adhesive tape strips.

Apply gel to the rear half (adhered dressing portion) and increase **gain** on the ultrasound unit. Use ultrasound to reacquire the target vein, positioning the probe while lightly holding dressing with thumb. Adjust ultrasound image and gain to your brightness preference. Inject lidocaine (Optional).



Press dressing down over IV and tubing and bring tubing through the split section. Use the tape strips as needed to close the split.

# **DRAPE**<sup>®</sup>



Using ultrasound guidance, insert the IV catheter into target vein, verify blood return, and advance the catheter as per policy and instructions. Complete the insertion and flush to confirm patency in the vein.



Secure catheter and tubing with tape and document date on the dressing.