Pulse Oximeter Sensor and Clip Application Tips

Description
The SurgiVet® pulse oximetry sensors and clips are designed to obtain a SpO₂ reading when used in conjunction with SurgiVet® or other compatible monitors with SpO₂ capabilities.

Function
Pulse oximetry sensors are used as a non-invasive method of measuring the oxygen saturation of the arterial blood (SaO₂), expressed as SpO₂ when obtained via pulse oximetry.

Instructions for Use
1. Select appropriate sensor and clip for tissue thickness.
2. Inspect sensor to make sure it does not appear damaged.
3. Insert sensor lobes into clip.
4. Connect sensor to monitor and power on monitor.
5. Make sure the red light in the sensor is illuminated.
6. Apply sensor to well perfused pink tissue with little or no hair with red light shining down.
7. Shield sensor from ambient light.

Experience will tell you which sensors and clips work best under different conditions.

V1702 Thin Tissue Sensor
(Blue split stop and adapter with small ‘Y’ Clip attached)
- Use on thin to medium thickness tissue sites with appropriate clip.

V1711 Thick Tissue Sensor
(Grey split stop and adapter with large ‘Y’ Clip attached)
- Use on medium to large thickness tissue sites with appropriate clip.

WWV1715 Variety Clip Package
(included with monitor system or sold separately)
Includes 1 each:
- Large ‘Y’ Clip
- Small ‘Y’ Clip
- Tail Wrap Clip
Application Sites
- Tongue
- Prepuce or vulva
- Achilles tendon of cat or small dog
- Ears
- Toe webbing
- Tail

Please note that very bright direct lighting can interfere with sensor function. It may be necessary to cover sensor site with a drape or a towel.

NOTE: Fur, dark pigmentation, poor perfusion and movement can affect the sensors ability to obtain accurate readings.

NOTE: Some anesthetic drugs, such as Xylazine (Rompun), Acepromazine, or Medetomidine (Domitor) can affect peripheral pulse pressures causing very weak pulsations. All pulse oximeters require a good quality pulse to work properly. Other drugs, such as ketamine, can cause the tongue to twitch, limiting the use of a lingual clip on that site.

WARNING! Prolonged use or the patient’s condition may require changing the sensor site periodically. Change the sensor site and check skin integrity, circulatory status, and correct alignment at least every 4 hours.

Care and Cleaning
- Disconnect sensor from monitor before cleaning or disinfecting.
- Clean and disinfect sensor with a soft damp cloth moistened in water or mild soap solution. To disinfect the sensor, wipe with isopropyl alcohol.
- Hold connector rather than cable when connecting or disconnecting the sensor from the monitor.
- Do not use excessive force, unnecessary twisting or kinking when connecting, disconnecting, storing or when using the sensor.

CAUTION! Do not autoclave, ethylene oxide sterilize, or immerse sensors in liquid.

CAUTION! Store sensors in a cool dry place.

Test Sensor Function
1. Connect sensor to monitor without extension cable and then power on the monitor.
2. Make sure the red light in the sensor is illuminated.
3. Apply sensor to an unpolished finger of a clinician with the light shining down on nail.
4. Rest hand on table to minimize motion.
5. Shield sensor from high ambient light by placing other hand over top.
6. Red light should be continuous. A blinking light may indicate tissue thickness is too thin or too thick.
7. SpO2 and pulse rate should appear in approximately 10 to 15 seconds. SpO2 should read 96% or higher.

For additional information, contact Clinical Support at (262) 513-8500 or toll-free 1-888-745-6562 (U.S.A. only).