



Vascularperspectives

innovations for the interventionalist

HELIX RADIAL COMPRESSION DEVICE

For easier patent haemostasis

HELIX™

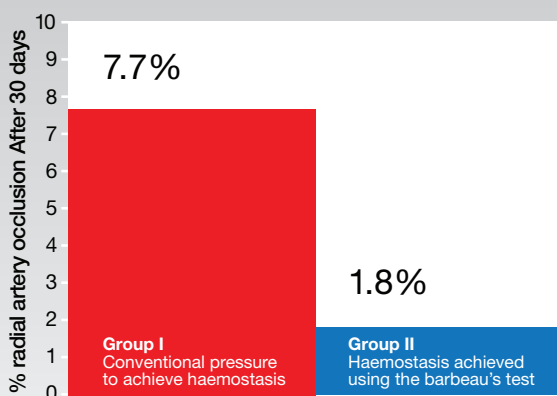
For easier patent haemostasis

The simple solution for 'guided' patent haemostasis and preservation of the radial artery



FINDINGS FROM THE PROPHET STUDY

Results:



“patent haemostasis represents a 75% reduction in radial artery occlusion”

Catheterization and Cardiovascular Interventions DOI 10.1002/ccd.

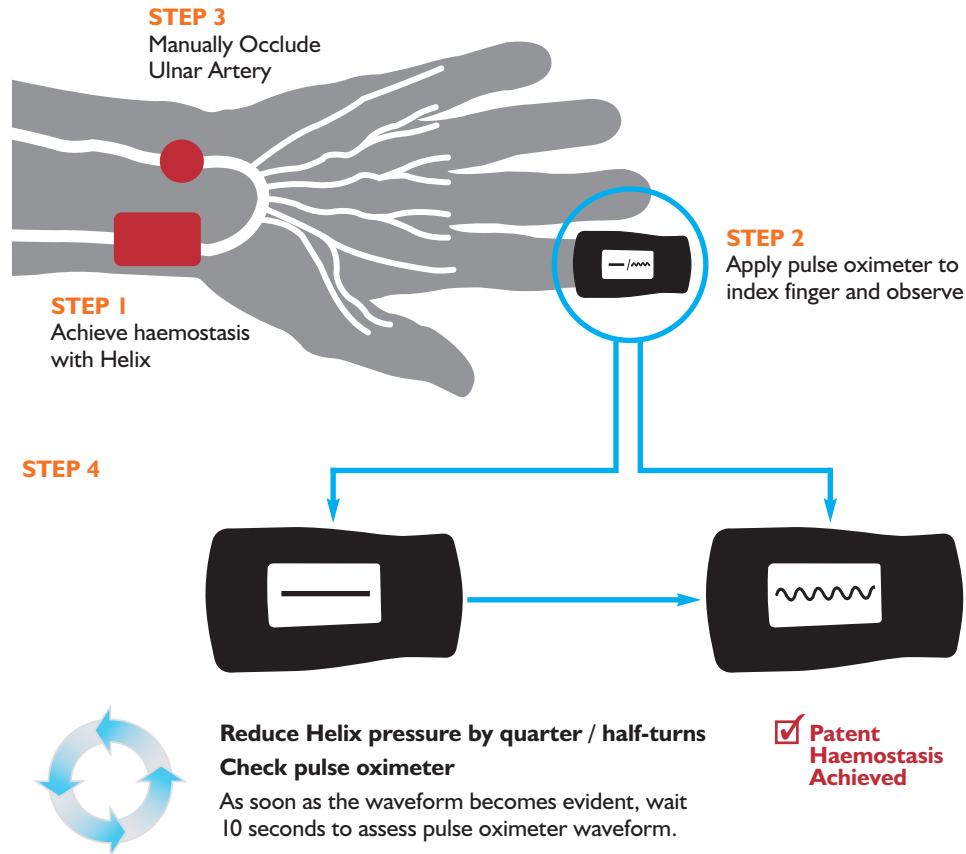
Published on behalf of The Society for Cardiovascular Angiography and Interventions (SCAI).

Objective: The objective of this study was to evaluate the efficacy of haemostasis with patency in avoiding radial artery occlusion after transradial catheterization.

Patients and Methods: Four hundred thirty-six consecutive patients undergoing transradial catheterization were prospectively enrolled in the study. Two hundred nineteen patients were randomized to group I, and underwent conventional pressure application for haemostasis. Two hundred seventeen patients were randomized to group II and underwent pressure application confirming radial artery patency using Barbeau's test. Radial artery patency was studied at 24 hr and 30 days using Barbeau's test.

Conclusion: Patent haemostasis is highly effective in reducing radial artery occlusion after radial access and guided compression should be performed to maintain radial artery patency at the time of haemostasis, to prevent future radial artery occlusion

HOW TO ACHIEVE PATENT HAEMOSTASIS



TIMINGS

Once patent haemostasis is achieved then follow the table below to guide Helix device removal

Patent Haemostasis Achieved

Heparin < 3000	1 hour	15mins		
Heparin 3000 - 5000	2 hours	15mins		
Heparin > 5000	3 hours	15mins		

Reduce pressure to check for successful haemostasis
(If full haemostasis is not achieved then patent haemostasis should be obtained again and a further 30 minutes of compression applied)

Check Puncture Site & Remove Device

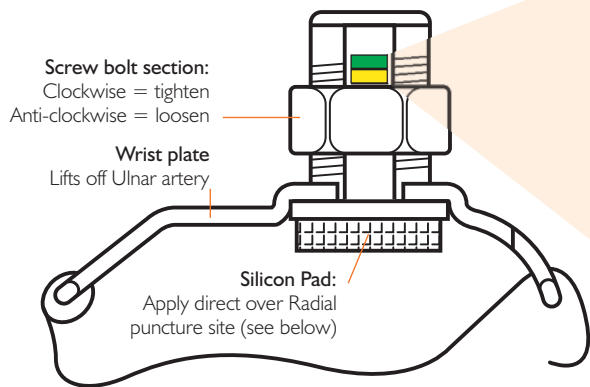
Additional Notes:

- The timings illustrated should only be used as a guide
- See Helix poster for more detail.

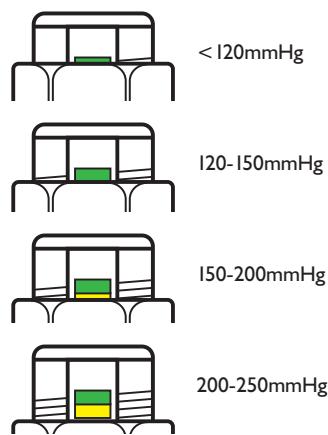
Post procedure protocol designed in partnership with:

University Hospital of North Staffordshire **NHS**
NHS Trust

APPLICATION OF DEVICE POST PROCEDURE

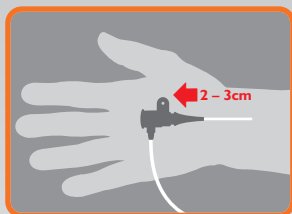


MATCH SYSTOLIC PRESSURE

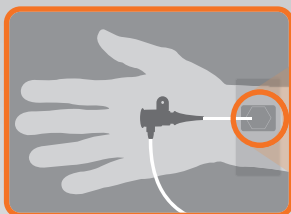


INSTRUCTIONS FOR USE

HOW TO APPLY

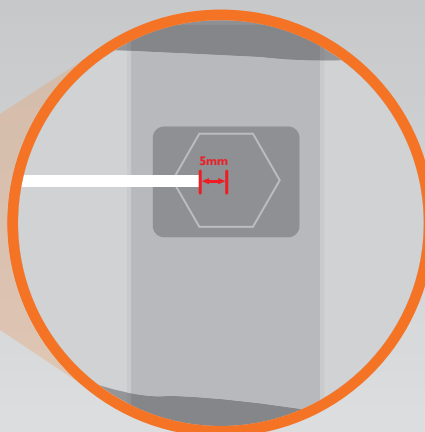


1. After the procedure
 – withdraw the sheath 2~3cm and confirm no vasospasm is evident. If vasospasm is evident then treat appropriately

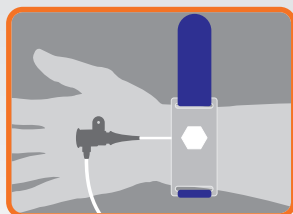


2. Align centre of cushion
 5mm behind puncture site and apply to patient.

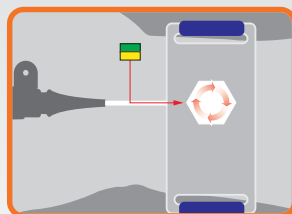
CAUTION
 The device must be positioned differently when use on the left or right hand. When attaching the device, ensure that the bottom of "M+" logo on the wrist plate is closest to the patient's little finger.



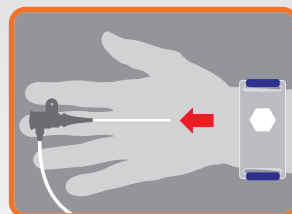
Visual puncture site on Radial should land distal to screw mechanism – close to middle of Silicon pad as possible.



3. Insert band into slot on wrist plate
Hint: Ensure velcro is threaded through on thumb side of the wrist.
Important: Ensure the device is applied firmly.



4. Make several clockwise rotations of turn cap until green marker is visible.
 Aim to achieve 20 – 30 mmHg above last measured systolic pressure of patient (see above).



5. Once the firmness of the device has been checked, remove Sheath.
 If any bleeding occurs tighten as necessary

Ordering information

Helix™

Cat. No.	Product	Quantity
010211	Helix™ Radial Compression Device	Supplied in boxes of 10
010215	King Size Helix™ Radial Compression Device	Supplied in boxes of 10

Oximeter

Cat. No.	Product
POX001	Finger Pulse Oximeter