

FASPLINT®

APPLICATION GUIDELINES

IMPORTANT: These application guidelines are intended solely as a guide to the appropriate procedures to be employed when using the FASPLINT® semi-disposable vacuum splint. You should ALWAYS follow the protocols established by your local medical director. These guidelines are for properly trained and authorized emergency medical personnel who operate under the direct medical supervision of a licensed Physician Medical Director.

The FASPLINT is designed to serve as a semi-disposable vacuum immobilization device. It provides support and stabilization without circumferential pressure being applied to the injured area. The FASPLINT should perform well for many patient applications. The longevity of the product will depend on call volume and care and maintenance of the product. As with all medical and rescue equipment, **you should always check and verify that the product is in proper working condition at the start of each shift and after each patient use before placing the product back in service.**

PREPARATION

Always make sure that the basic ABC's of airway, breathing and circulation are intact prior to any splinting activities. Have all your equipment ready for use. This includes your evacuation source (manual pump or portable suction unit) as well as your fastening means (tape, Kling®, etc.)

WRAP

Maintain support of the injured area and apply the splint by wrapping the FASPLINT around the injured area so that the joint above and the joint below the injury site will be immobilized. Palpate distal pulses and check for capillary refill prior to application. **See pictograms at right.**

OPEN VALVE

The FASPLINT valve is a simple push-pull plunger type valve. When the valve stem is pushed **IN** the valve is **CLOSED**. When the valve stem is pulled **OUT** the valve is **OPEN**. Open the valve by pulling on the right angle valve extension tube where it connects to the red valve stem.

EVACUATE AIR

With the valve in the open position, connect your suction source to the FASPLINT. Insert the tapered tip of your FASPLINT pump hose into the right angle valve extension tube. Make sure you have a good connection and that the valve remains open. Evacuate the air from the FASPLINT until the splint forms a rigid cast around the injured area. (Note that a tapered tip adapter is available that allows you to utilize an EVAC-U-SPLINT® manual pump with the FASPLINT. Please call us for details.)

CLOSE VALVE

Once the desired firmness is achieved, close the valve on the FASPLINT. **PUSH** the valve stem **IN** to **CLOSE** the valve. After the valve is closed remove the suction source. Recheck the FASPLINT for firmness. If, for any reason, the FASPLINT does not retain its rigid supportive form, recheck the splint and evacuate the air from the splint again making sure to securely close the valve. If the splint still does not retain its rigidity, carefully remove the splint and apply a different FASPLINT of the same or larger size or another type of splint to securely stabilize the injured area.

SECURE IN PLACE

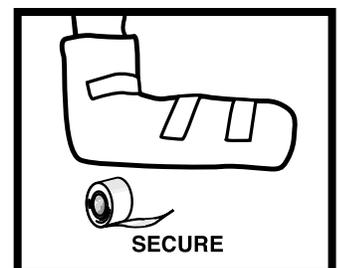
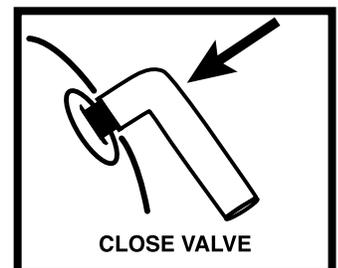
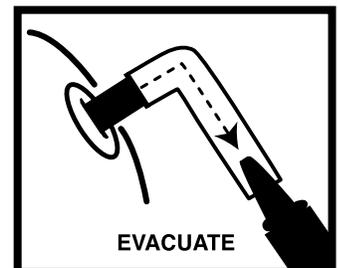
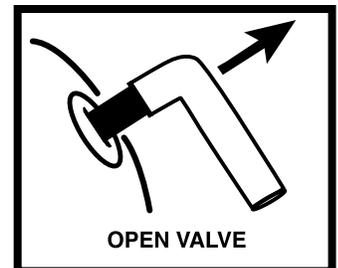
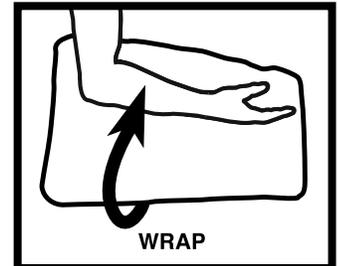
While maintaining support of the FASPLINT, which is now evacuated, recheck distal pulses and circulation. Once distal pulses and circulation have been confirmed, you may secure the FASPLINT with tape or other means. Continue to monitor circulation and sensory functions en route to the medical facility. **Also, continue to monitor the rigidity and effectiveness of the FASPLINT during transport.** Make adjustments if the patient condition changes. **ALWAYS FOLLOW YOUR LOCAL MEDICAL PROTOCOLS.**

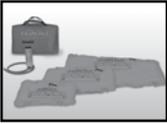
REMOVAL

Remove the fastening material (tape, Kling, etc.) prior to allowing air back into the FASPLINT. **DO NOT CUT the FASPLINT.** Make sure all hospital personnel are informed about these removal procedures. Open the valve and allow air to enter the splint. Remove the splint.

TRAINING LOG

Everyone who will be using the FASPLINT should be required to actively participate in the initial training and all subsequent training sessions. Questions? Give us a call at 800-633-5900.





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DOCUMENTATION OF TRAINING

Everyone who will be using or operating the FASPLINT® semi-disposable vacuum splint should be required to actively participate in the initial training and all subsequent refresher training sessions. This will ensure a clear understanding of the function and capabilities of the FASPLINT. These are suggested documentation formats. Additional copies may be necessary to meet your organization’s needs. Photocopy or create additional forms according to your medical director’s guidelines.

Date	Attendees	Instructor’s Name	Training Site

MAINTENANCE LOG

Routine inspection and maintenance is required to keep the FASPLINT semi-disposable vacuum splint ready for immediate use. If, at any time, the FASPLINT is suspected of not functioning properly it should be taken out of service until such time that it can be thoroughly inspected and properly repaired or replaced.

Date	Maintenance Performed	Technician’s Name	Signature



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