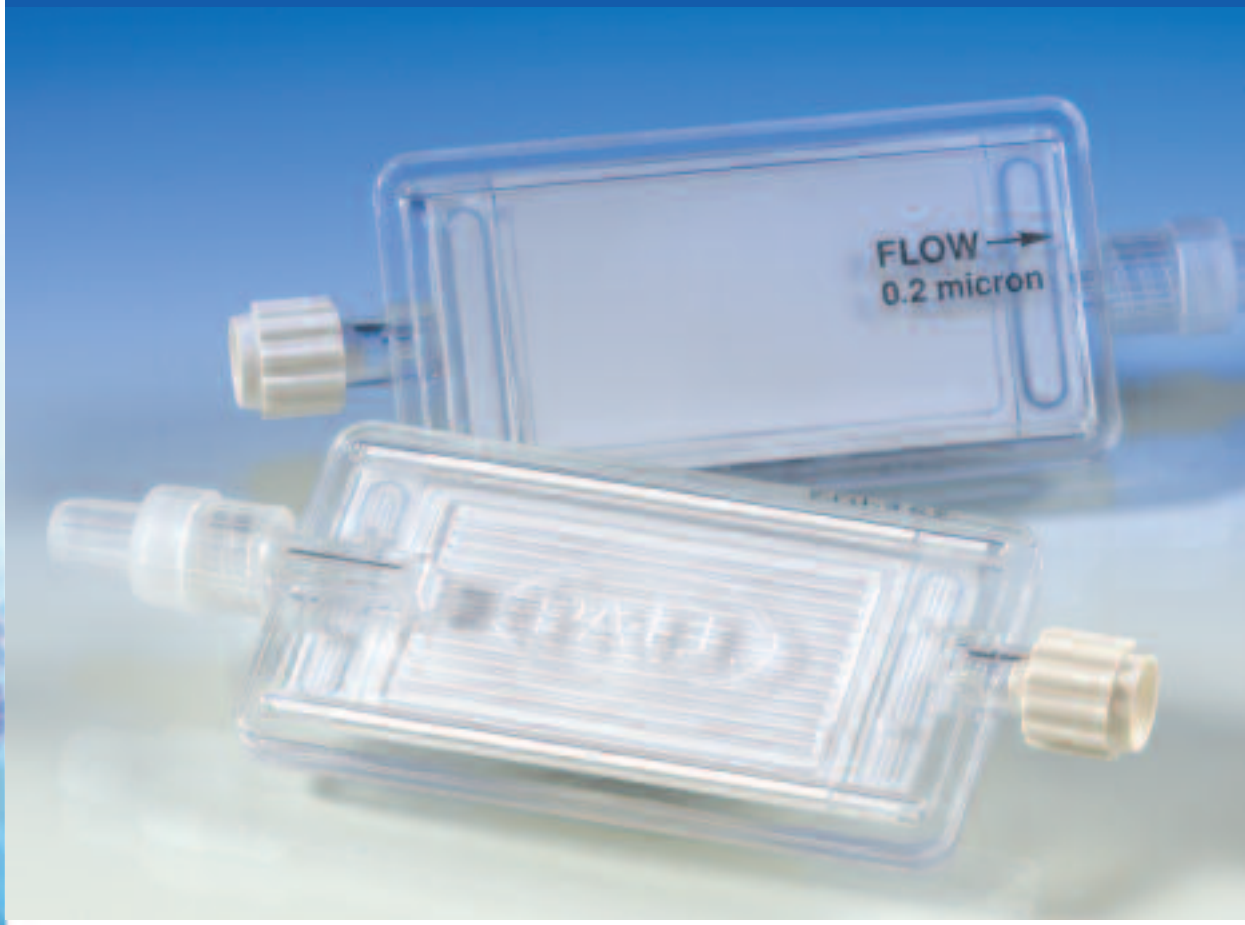
PALL Medical

Posidyne® ELD Filter



Air-eliminating filter designed for 96-hour particle, bacteria and endotoxin retention

Features

- Removes particles
- Retains microorganisms and associated endotoxins
- Eliminates air
- Non-phthalate fluid pathway
- Slim housing profile

Benefits

- Protects patients against particle-related risks
- 96-hour life on filter and set reduces cost of IV therapy and minimizes nursing time and set manipulations
- Minimizes air emboli
- Suitable for paclitaxel delivery
- Simple to tape in place

*Filtration. Separation. Solution.*SM

Inadvertent Contamination of Infusion Solutions Can Have Serious Consequences

- Particulate contamination arises from a variety of sources, intrinsically in infusates and equipment or extrinsically due to manipulations.[1] Particles cause phlebitis on peripheral infusion lines and have serious systemic effects, damaging the lung and solid organs by irritation of the endothelium and by deposition in the microvasculature[2].
- Microbiological contamination of IV administration systems arises inadvertently due to manipulations[3]. Some bacteria can grow rapidly in infusion fluids, increasing the infection risk[4].
- Endotoxins have serious effects on the inflammatory and coagulation systems. They are released by Gram-negative bacteria and have been shown to penetrate conventional IV filters[4]. Only filters that retain endotoxins can safely be used for more than 24 hours[5].
- Entrained air can arise from infusion solutions degassing, incomplete priming or disconnections. Air can be particularly problematic on central lines, leading to air embolism, which can be fatal[6].

Specifications

Filter Media
0.2 µm positively charged Nylon Posidyne® membrane

Filters and Tubing Extension
Non-phthalate, free of natural rubber latex

Dimensions (approximate)
Length = 6.9 cm
Width = 3.6 cm
Depth = 0.7 cm

Connectors
Male luer lock outlet and female luer lock inlet

Filter Housing Volume
Approximately 2 mL

Approximate Total Hold-up Volume

ELD96NT*, ELD96NTE**	2.0 mL
ELD96LLCE**	2.6 mL
ELD96LL*	2.7 mL
ELD96LYL*, ELD96LYLE**, ELD96NY*	2.8 mL (including volume from Y-site to tubing outlet of 0.3 mL)
ELD96NYS*	4.3 mL (including volume from Y-site to tubing outlet of 1.0 mL)
ELD96LYLS*, ELD96LYLSE**	4.3 mL (including volume from Y-site to tubing outlet of 1.2 mL)

*Intended for distribution or use in the USA.
**Intended for distribution or use in Europe.

Sterility
Sterile and non-pyrogenic fluid pathway

Maximum Flow Rate***
Variants with standard bore extension tubing:
approximately 21-23 mL/min
ELD96NYS approximately 35 mL/min

Variants with microbore extension tubing:
approximately 13-14 mL/min
ELD96NY approximately 18.5 mL/min

Maximum Working Pressure
1500 mm Hg (approximately 30 psi, 2 bar)

Usage Specifications
Single patient use up to 96 hours
Can be used with continuous infusions or intermittent infusions/injections

***Tested under gravity with 0.9% saline solution at 1 m head height.

Ordering Information

Product Description	Reorder Code USA Only	Reorder Code Europe Only	Packaging (Units/Case) USA	Packaging (Units/Case) Europe
With microbore extension tubing	ELD96LL	ELD96LLCE[1]	48	50
With microbore extension tubing and Y injection site	ELD96LYL	ELD96LYLE[1]	48	50
With microbore extension tubing and needleless Y injection site	ELD96NY	—	48	—
With standard bore extension tubing and Y injection site	ELD96LYLS	ELD96LYLSE[1]	48	50
With standard bore extension tubing and needleless Y injection site	ELD96NYS	—	48	—
Without extension tubing	ELD96NT	ELD96NTE	40	40

[1]with downstream slide clamp

References

1. Ball, P.A. (2003) Intravenous in-line filters: filtering the evidence. *Curr Opin Clin Nutr Metab Care*, 6:319-25.
2. Lehr, H.A. *et al.* (2002) Particulate matter contamination of intravenous antibiotics aggravates loss of functional capillary density in postischemic striated muscle. *Am J Respir Crit Care Med*, 165:514-20.
3. Trautmann, M. *et al.* (1997) Bacterial colonization and endotoxin contamination of intravenous infusion fluids. *J Hosp Infect*, 37:225-36.
4. Richards, C. & Thomas, P. (1990) Use of endotoxin retentive intravenous filters with pediatric total parenteral nutrition solutions. *J Clin Pharm Ther*, 15:53-8.
5. Richards, C. & Grassby, P.F. (1994) A comparison of the endotoxin-retentive abilities of two '96-h' in-line intravenous filters. *J Clin Pharm Ther*, 19:199-202.
6. Coppa, G.F. *et al.* (1981) Air embolism: a lethal but preventable complication of subclavian vein catheterization. *JPEN J Parenter Enteral Nutr*, 5:166-8.
7. Muth, C.M. & Shank, E.S. (2000) Gas embolism. *N Engl J Med*, 342 (7):476-482.

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