Ordering information

Category	Cat. No.	Description	Features	Diame <u>ter/size</u>	Length	With trocar	Trocar <u>size</u>	Qty.
Hemaduct [®] Round Drains								
	JP-HUR100	Silicone round drain	3/4 length channels, interconnecting portals	10 Fr x 40 cm	122 cm			10 ea/bx, 8 bx/cs
	JP-HUR101	Silicone round drain	3/4 length channels, interconnecting portals	10 Fr x 40 cm	122 cm	1	3 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUR150	Silicone round drain	3/4 length channels, interconnecting portals	15 Fr x 40 cm	122 cm		<u>.</u>	10 ea/bx, 8 bx/cs
	JP-HUR151	Silicone round drain	3/4 length channels, interconnecting portals	15 Fr x 40 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUR190	Silicone round drain	3/4 length channels, interconnecting portals	19 Fr x 40 cm	122 cm		<u>.</u>	10 ea/bx, 8 bx/cs
	JP-HUR195	Silicone round drain	3/4 length channels, interconnecting portals	19 Fr x 40 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUR860	Silicone round drain	Full length channels, interconnecting portals	10 Fr x 30 cm	122 cm			10 ea/bx, 8 bx/cs
	JP-HUR870	Silicone round drain	Full length channels, interconnecting portals	10 Fr x 30 cm	122 cm	1	3 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUR880	Silicone round drain	Full length channels, interconnecting portals	15 Fr x 30 cm	122 cm		<u>.</u>	10 ea/bx, 8 bx/cs
	JP-HUR890	Silicone round drain	Full length channels, interconnecting portals	15 Fr x 30 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUR900	Silicone round drain	Full length channels, interconnecting portals	19 Fr x 30 cm	122 cm			10 ea/bx, 8 bx/cs
	JP-HUR910	Silicone round drain	Full length channels, interconnecting portals	19 Fr x 30 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
Hemaduct® Flat Drains								
	JP-HUF070	Silicone flat drain	Full length channels, interconnecting portals	7 mm x 20 cm	122 cm			10 ea/bx, 8 bx/cs
	JP-HUF071	Silicone flat drain	Full length channels, interconnecting portals	7 mm x 20 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUF100	Silicone flat drain	Full length channels, interconnecting portals	10 mm x 20 cm	122 cm			10 ea/bx, 8 bx/cs
	JP-HUF101	Silicone flat drain	Full length channels, interconnecting portals	10 mm x 20 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
	JP-HUF104	Silicone flat drain	3/4 length channels, interconnecting portals	10 mm x 20 cm	122 cm	1	5 mm x 15 cm	10 ea/bx, 8 bx/cs
Bulb reservoirs								
	SU130-1305	Single port bulb reservoir	100 ml					10 ea/bx, 3 bx/cs
	SU130-1000	Dual port bulb reservoir	400 ml					10 ea/cs
3-Spring rese	voir		.,		.,			
	SU130-475	Reservoir kit with silicone drain adapters	400 ml					6 ea/bx, 2 bx/cs

For more information, please contact your local Cardinal Health sales representative or visit cardinalhealth.com.

1 Zacharski et al Mechanism of Obstructions of Closed-wound Suction Tubing Arch Surgical – Vol 114 May 1979 p 614-615 2 Karimov, Jamshid H. et al. Incidence of chest tube clogging after cardiac surgery: a single-centre prospective observational study. European Journal of Cardio-Thoracic Surgery Vol 44 (2013) p 1029-1036.

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Jackson-Pratt® Hemaduct® Wound Drains









The challenge of tissue ingrowth

Tissue ingrowth into wound drainage devices remains a clinical challenge. In a study conducted by Zacharski and others,¹ the authors discovered that 20 of the 21 explanted wound drains studied contained tissue ingrowth related occlusions. In a second study, 28 Fr drainage devices were shown to occlude as early as 1.52 days following surgery.²

The extent of soft tissue related obstructions may be more or less prevalent depending upon drain design. Should a perforated drain or channels within a channel drain become obstructed by soft tissue ingrowth, no alternative fluid pathway exists. The flow of negative pressure prior to the point of soft tissue in-growth, and the flow of fluid beyond, may both become impeded—reducing the potential for fluid removal.

The challenge of maintaining drains in home settings

The growing trend of reduced hospital stays has resulted in an increase use of wound drains in home settings. If a wound drain were to become occluded after a patient is discharged, trained home care professionals may not always be present to quickly assess and address an obstruction that may eventually result in stagnant fluid and a surgical site infection.

There is now a heightened need for a wound drain design which allows multiple fluid pathways should soft tissue obstructions restrict continuous fluid flow, throughout the drain.

Jackson-Pratt® Hemaduct® Wound Drains allow multiple fluid pathways should soft tissue obstructions restrict continuous fluid flow, throughout the drain. The drain is comprised of both open and closed channels that are interconnected by internal portals that span the length of the drain. Should soft tissue obstructions in-grow into an open Hemaduct® channel, the internal portals allow fluid to change channels and find alternative pathways around the obstructions.

> Silicone advantage Silicone material provides strength and softness

Internal portals

Internal portals interconnect open and closed channels to allow fluid to change channels and circumvent obstructions

Closed channels

Closed channels minimize the risk of tissue ingrowth while providing an alternative pathway for fluid

Open channels

Open channels span the length of the drain and maximize fluid collection potential