

BD

Helping all people
live healthy lives

BD Insyte™ Autoguard™

Shielded I.V. Cannula System

Delivering protection and ease-of-use[1-9]

BD Insyte™ Autoguard™ – helping to meet the c

The major challenges faced in I.V. therapy today … and how BD can help

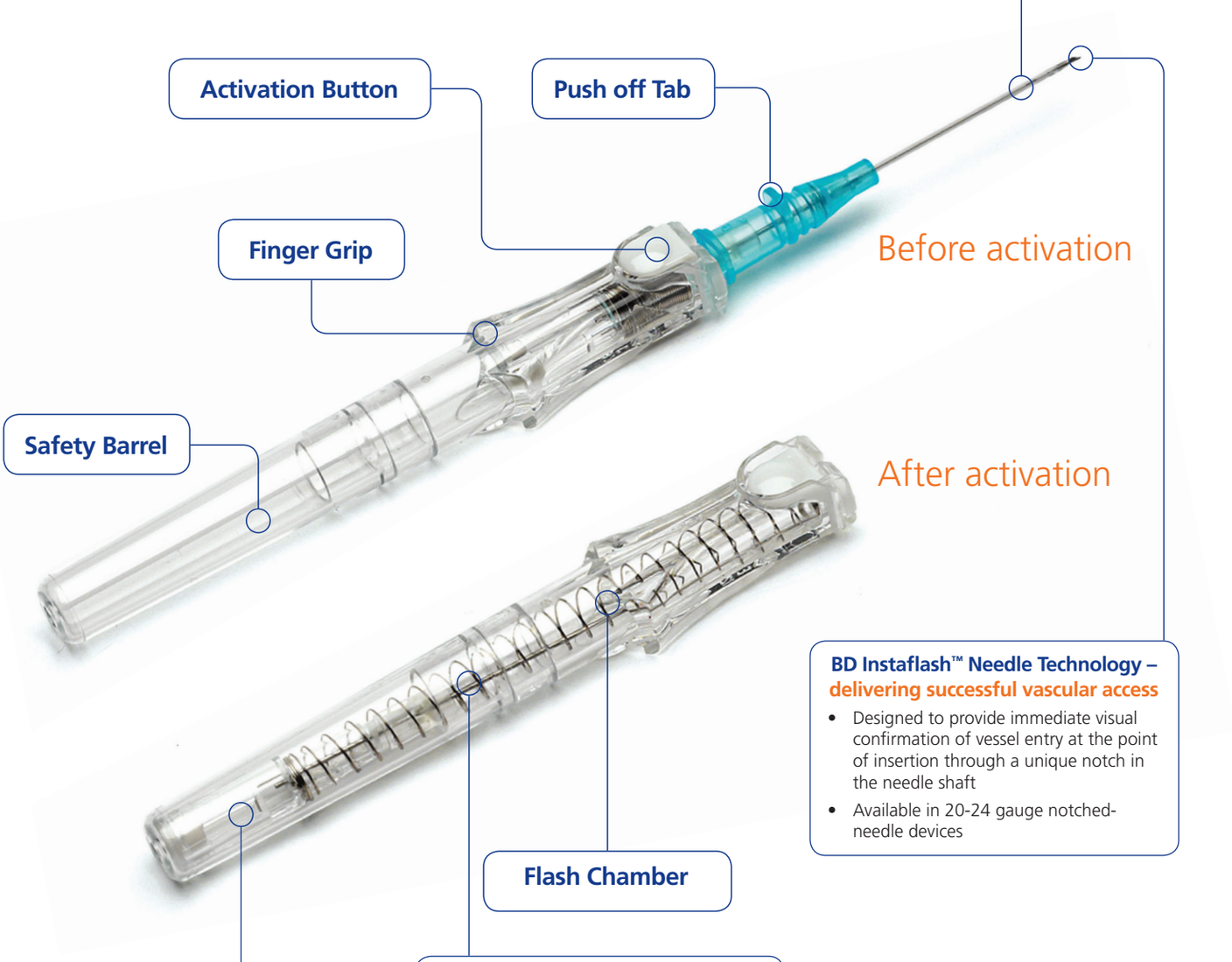
Risk of phlebitis and resites	The last thing you want to do is tell your patient you have to resite their I.V. cannula. Clinically proven BD Vialon™ Biomaterial softens in the vessel,[5,7,8] reducing the chance of mechanical phlebitis by up to 50%,[5-7] and provides longer indwell times.[5-8]
Blood exposure and needlestick injuries are a risk	Everyday you are at risk of being exposed to patients' blood, or to a needlestick injury, increasing the likelihood of contracting a blood-borne disease. BD Insyte™ Autoguard™ push-button needle shielding technology was proven to effectively safeguard healthcare workers, with a 95% reduction in needlestick injuries.[3]
Clinicians are busier than ever	You have patients waiting and you are short of time. BD Insyte™ Autoguard™ has the BD Instaflash™ needle technology designed to reduce hit-and-miss insertion by confirming vessel entry, enabling you to stay focused on the insertion site.
Healthcare costs are rising rapidly	Everyone is worried about the costs of healthcare. BD Insyte™ Autoguard™ is designed to improve clinical outcomes through its safety design and ease-of-use, which may help reduce needlestick injuries and may reduce costs.[7,8]



e daily challenges of I.V. therapy

BD Vialon™ Biomaterial – for longer indwell times[5-8]

- Clinically proven BD Vialon™ Biomaterial softens in the vessel,[5,7,8] reducing the chance of mechanical phlebitis by up to 50% (compared to Teflon®)[5-7]
- BD Vialon™ Biomaterial is more flexible and kink resistant (compared to Teflon®)[6,7]



BD Instaflash™ Needle Technology – delivering successful vascular access

- Designed to provide immediate visual confirmation of vessel entry at the point of insertion through a unique notch in the needle shaft
- Available in 20-24 gauge notched-needle devices

Patented Shielding technology – for user safety[3]

- Safety-engineered design to reduce I.V. stylet-related needlestick injuries and blood exposure
- Proven to significantly reduce needlestick injuries by 95% ($p<0.001$) compared to non-safety cannulae[3]

Easy to use

- Healthcare workers rated BD Insyte™ Autoguard™ as very easy/easy to use[3] and found ease of penetration to be better versus other cannulae[6,7]

Product Specifications

BD Insyte™ Autoguard™ Shielded I.V. Cannula with BD Vialon™ Biomaterial

Reference Number	Colour Code	Gauge Size	Cannula Length (inches)	Cannula O.D. (mm)†	Cannula I.D. (mm)†	Units Box/ Case	Flow Rate H_20 (mL/hr)
381412	Yellow	24	0.75	0.70	0.52	50/200	1200
381423	Blue	22	1.00	0.88	0.65	50/200	2100
381437	Pink	20	1.88	1.08	0.80	50/200	3300
381434	Pink	20	1.16	1.08	0.80	50/200	3600
381433	Pink	20	1.00	1.08	0.80	50/200	3900
381447	Green	18	1.88	1.30	0.98	50/200	5700
381444	Green	18	1.16	1.30	0.98	50/200	6300
381457	Grey	16	1.77	1.74	1.36	50/200	12300
381454	Grey	16	1.16	1.74	1.36	50/200	13200
381467	Orange	14	1.75	2.15	1.74	50/200	19800

BD Insyte-N™ Autoguard™ Shielded I.V. Cannula with Wings and BD Vialon™ Biomaterial

Reference Number	Colour Code	Gauge Size	Cannula Length (inches)	Cannula O.D. (mm)†	Cannula I.D. (mm)†	Units Box/ Case	Flow Rate H_20 (mL/hr)
381411	Yellow	24	0.56	0.70	0.52	50/200	1200

† Average dimension.

References: 1. Salgado CD, Chinnes L, Paczesny TH, Cantey JR. *Infect Control Hosp Epidemiol.* 2007; 28(6): 684-688. **2.** Rupp ME, Sholtz LA, Jourdan DR, *et al. Clin Infect Dis.* 2007; 44(11): 1408-1414. **3.** Mendelson MH, Lin-Chen BY, Finkelstein-Bond L. *et al.* 11th Annual Meeting of the Society for Healthcare Epidemiology of America (Toronto, Canada); Abstract. 2001. **4.** Murphy C. *Healthcare Infection.* 2008; 13: 33–37. **5.** Maki DG, Ringer M. *Ann Intern Med.* 1991; 114: 845-854. **6.** Gaukroger, Roberts JG, Manners TA. *Anaesth Intens Care.* 1988; 16(3): 265-271. **7.** McKee JM, Shell JA, Warren TA, Campbell VP. *J Infus Nurs.* 1989; 12(5): 288-295. **8.** Stanley MD, Meister E, Fuschuber K. *South Med J.* 1992; 85(9): 883-886. **9.** Jarvis WR, Murphy C, Hall KK, *et al. Clin Infect Dis.* 2009; 49(12): 1821-1827.

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