## OPTIONS

NOTE: Press YES at each field to advance to the next field. Pressing YES to ACCEPT OPT at the end of the menu is mandatory to confirm all changes made in the OPTIONS menu.
Lock: This is the security level setting. Press YES to accept or NO to change ock Setting. Enter access code if prompted. Press YES to accept new setting.
Clin DOSE: This is the Clinician Dose feature. Press YES to leave the screen off. If an extra Clinician Dose is ordered, press NO to OFF (enter access code Clinician Dose. Press YES to confirm Clinician Dose and YES to ACCEPT?
SHIFT TOT: This is the accumulated infusion data. Press YES to leave the creen off. To view, press NO to OFF and YES to ON. To clear Shift Totals, menu. HRLY TOT: This is the hourly infusion totals. Press YES to leave the screen off or NO to change to ON, then press YES to ON to view. Use the UP/ DOWN ARROW keys to view the previous 24 hour totals. Press NO to exit the screen
CLR HRLY: Press YES to leave the screen off or NO to change to ON, then press YES to ON to view. At the ACCEPT? YES/NO field, press YES to clear or NO to retain the Hourly Totals and exit the screen.
medLMTS: This OPTION appears only if MedLMTS (medication limits) have been programmed. This feature allows for program parameters to be or NO to titrate, then press YES to ON. Enter new infusion parameters and press YES to accept.
DN Occlu: This is the downstream occlusion sensitivity setting (default setting is HIGH). Press YES to accept or NO to change then press YES to accept.
AIR SENS: This is the air-in-line sensitivity setting (default setting is 0.5 mL ). Press YES to accept or NO to change then press YES to accept
AUDIO: This is the audible volume control: Press 1-9 to hear level, press YES to accept the desired volume.
POWER CK. This is the power source with power graph. Press YES to leave the screen off or NO to change to ON, then press YES to ON to view the power graph. Screen automatically returns to OPTIONS menu after several seconds.
ACCEPT OPT: Press YES to accept any changes made. Pressing NO will cancel any setting changes.

## CHANGING THE SOLUTION CONTAINER

1. Press the PAUSE key
2. Change the solution container.
3. Highlight REPEAT RX, then press YES
4. Highlight correct therapy if requested, then press YES
5. If any on-screen alerts appear, press the YES key
. Note any on-screen ADVISORY and press YES to continue
7.The program will auto-scroll (or confirm each field by pressing YES). 8. Press RUN to start the infusion.

## CHANGING THE RX

(BAG VOL, BASL RATE, Pt BOLUS, BOLUS INT, \# BOLS/hr)

1. Press the PAUSE key
2. Press YES to RESUME
. Press NO to review.
3. Press YES to each field until the value to change is reached
4. At the desired field(s), enter the new program parameters (enter access code if prompted). If an access code was needed, enter the new parameters again. Press YES to confirm
5. Press YES to all other highlighted areas if no other changes are to be made.
6. At DONE? press YES
7. Press RUN to start the infusion.

## TROUBLESHOOTING:

NOTE: For all alarms except "INFUSION COMPLETE", follow these
silence and exit Alarm/Alert screens, press the PAUSE key, press YES to RESUME, then resolve the alarm. When ready to resume the infusion press RUN to start the infusion.

## LCD DISPLAY/RESOLUTION/POSSIBLE CAUSES

INFUSION Press PAUSE, attach new solution container, highlight COMPLETE REPEAT RX and press YES. The program will auto-scroll (o confirm each field by pressing YES). If therapy is complete turn pump off.
AIR-IN-LINE Press the PRIME key, then follow on-screen instructions to remove air from the tubing and IV bag. CAUTION: Disconnect set from patient's access site before priming Sets with in-line ASVs must be primed on the pump.
ALARM DOWN Down occlusions auto-correct when occlusion is resolved OCCLUSION without the need to press PAUSE. Check the tubing from pump to patient's IV site for cause, then correct obstruction per protocol. Consider changing the DN Occlu setting from LOW to HIGH (See OPTIONS section). Possible causes kinked or clamped line, infiltrated/positional IV site, viscous solution, small gauge catheter.
ALARM UP Check tubing from pump to IV bag for cause, then correct
OCCLUSION obstruction per protocol. Possible causes: glass container without vented spike adapter, line kinked in pump door, bag empty, bag not spiked properly.

ALARM HIGH UP Check for excessive pressure on IV bag. Causes: uneven
PRESSURE fluid distribution within lockbox or carrying pouch, object pressing on solution container.
alarm set not Use only Curlin administration sets. Check that set is
INSTALLED installed properly. Refer to Instructions for Use in se package or Installing Administration Set section in this guide. Possible causes: tab not removed from yellow Flow-Stop, blue guide pin or yellow Flow-Stop not properly seated in receptacles, no set installed

ALARM The pump will alarm when left idle for 2 minutes. Press RUN UNATTENDED to start the infusion or press OFF to power down the pump.
ALARM REPLACE Replace set and prime if necessary. Possible causes:
SET 3 flattening of the soft pumping segment of the set due to overuse, use of a glass container without a vented spike adapter, excessive plunger stiction with syringe use.
ALARM REPLACE Equalize the pressure in the set by priming (disconnect from SET 4 the patient). Turn pump OFF then ON to reset the sensor prior to resuming the infusion.

ALARM DOOR Check placement of the administration set and close pump OPEN door properly. See User's Manual for instructions.
ALARM EMPTY Turn pump off by pressing the OFF key. Install 2 new
BATTERY batteries and turn pump back on.
ERROR CODE
If an error code occurs, turn pump off and consult provider or manufacturer.

## CLINICIAN GUIDE

## PCA THERAPY



## MOOG

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## CAUTION:

Previous RX must be cleared from the pump prior to new patient use. Refer to the "CURLIN 6000 TRAINING \& QUICK REFERENCE GUIDE FOR BETWEEN PATIENT USE" (Contact Customer Service for information).

## INSTALLING/CHANGING THE BATTERIES

. PAUSE the pump.
2. Turn the pump OFF
3. Open the battery door by sliding the gray "slider" to the right to the "UNLOCK" position and slide the door down to remove.
4. Remove old batteries from the top first. Insert new batteries bottom or flat side against the coils first, then push the top side into place.
5. Replace door and return slider to "LOCK" position and turn pump ON.
6. Press YES to PROGRAM (or LIBRARY if using the protocol LIBRARY).
7. Press YES to RESUME (or YES to Repeat RX if current container has not begun or if changing the container).
8. Press RUN to start.

INSTALLING THE ADMINISTRATION SET


1. Open pump door.
2. Remove the old tubing.
3. Remove the new administration set from the package.
4. Twist and remove breakaway tab from YELLOW Flow-Stop.
5. Locate the BLUE and YELLOW arrows inside the pump as a reference point . Insert the tubing using the reference points,
6. Ensure the tubing passes through the notch in front of the door hinge. 8. Center tubing over pumping fingers.
7. Close the door securely. Be sure top of door is flush with top of the pump.

## PRIMING THE SET

CAUTION: Disconnect set from patient's access site before priming
NOTE: Review program settings prior to priming.
NOTE: Filters must be primed in the upright position (do not invert). Refer to Instructions for Use in set package

## BY GRAVITY:

NOTE: To remove air from IV bag, turn bag upside down after attaching the the bag.

1. Twist and remove breakaway tab from YELLOW Flow-Stop prior to connecting to solution container.
2. Squeeze YELLOW Flow-Stop between thumb and forefinger to allow fluid to flow through tubing

## BY PUMP:

NOTE: Therapy must be programmed and administration set must be
installed into the pump prior to pump priming. Sets with in-line ASV must be primed on the pump.

1. Release any clamps on the administration set.
2. Press the PRIME key from the "RUN TO START" screen.
3. Press and hold the PRIME key until set is free of air; release PRIME key to stop (each prime cycle allows up to 6 mL of fluid).
4. Press the YES key to exit priming.

## PROGRAMMING A PCA THERAPY USING MANUAL PROGRAM MODE

NOTE: When operating the pump on battery power, the LCD screen dims after a period of time to conserve battery power. Any keypress will illuminate the screen.
NOTE: Use the UP/DOWN ARROW keys to move highlighter. Use the numeric keys for data entry.

1. Turn the pump ON and wait for the self-test to complete. 2. Highlight PROGRAM from the SELECT menu and press YES

NOTE: The following screen ("NEW PROGRAM") will not appear if the previous
RX has been cleared from the pump. If this screen does not appear, skip to step \#4.
3. Highlight NEW PROGRAM and press YES. Enter access code, if prompted.
4. Highlight PCA from the therapy selection menu and press YES. If any onscreen alerts appear, press the YES key.
5. With Unidentified highlighted, press YES (this indicates Manual Programming Mode)
6. Select UNITS: Press YES if units desired is indicated (choices are $\mathrm{mg}, \mathrm{mcg}$ or mL ). To change units press NO until desired unit is reached, then press YES to confirm. If mg or mcg is selected, enter the concentration and press YES.
7. Select ADMIN RT: Press YES if administration route desired is indicated (choices are IV, Epidural or SQ). To change ADMIN RT press NO until desired route is reached, then press YES to confirm.
8. Enter the LOAD DOSE amount if ordered. If no loading dose is ordered, leave at zero, then press YES to confirm.
9. Press YES to leave MedLMTS Off, or press NO to set MedLMTS. Refer to the User Manual for MedLMTS instructions.
10. At Next? Press YES to continue.
11. Enter Bag Volume, press YES.
12. Enter BASL RATE (if any), press YES.
13. Enter Pt BOLUS dose (if any), press YES
14. Enter the Pt BOLUS INT (if Pt BOLUS is set), press YES
15. Enter \# BOLS/hr, press YES (60/Bolus INt = max \# Boluses in one hour. This field may be set to the maximum boluses or fewer if ordered).
16. Press YES at DONE?

## PROGRAMMING A PCA THERAPY <br> <br> USING PROTOCOL LIBRARY MODE

 <br> <br> USING PROTOCOL LIBRARY MODE}NOTE: When operating the pump on battery power, the LCD screen dims after a period of time to conserve battery power. Any keypress will illuminate the screen.
NOTE: Use the UP/DOWN ARROW keys to move highlighter. Use the numeric keys for data entry.

1. Turn the pump ON and wait for the self-test to complete.
2. Highlight LIBRARY from the SELECT menu and press YES.
3. Highlight NEW PROGRAM and press YES. Enter access code, if prompted.
NOTE: While YES is highlighted in the Page Down field, press YES to move to the next page while in the CAT (category) and DRG (drug) menus.
4. Highlight the desired CAT, press YES.
5. Highlight the desired DRG, press YES
6. Press YES to ACCEPT?
7. If any on-screen alerts appear, press the YES key.
8. Note any on-screen ADVISORY and press YES to continue
9. Press YES to confirm the dosing UNITS
10. If a concentration is present, ensure the concentration matches the medication container. If correct, press YES to confirm.
11. Press YES to confirm the ADMIN Rt (Administration Route).
12. Enter the LOAD DOSE amount if ordered. If no loading dose is ordered, leave at zero, then press YES to confirm.
13. At Next? press YES to continue.
14. Accept pre-programmed values for BAG VOL, BASL RATE, Pt BOLUS, BOLUS INT and \# BOLS/hr if they are correct, by pressing YES to each field.
15. If changes are needed to the pre-programmed values, highlight the desired field and press NO. Enter the correct value and press YES
16. Continue as above until programming is completed.
17. Press YES at DONE?

## "RUN TO START" SCREEN



1. Press the NO key to review the program and/or change the RX (see CHANGING THE RX section for instructions)
2. Press the OPTIONS Key to review or change desired pump settings (see OPTIONS section for instructions).
3. Press the PRIME Key to prime the set (see Priming section for instructions).
4. Press RUN to start the infusion

## MOOG TERMS \& DEFINITIONS

LOADING DOSE - Dose given at start of therapy only
BASAL RATE- Continuous rate
PT BOLUS - PCA demand dose
BOLUS INTERVAL - Lockout time between bolus doses \# OF BOLUSES/HR - Number of total boluses allowered per hour CLINICIAN DOSE - Clinician given dose

