# **TRU-CLOSE**<sup>®</sup>

#### **Suction Drainage System**



## **TCS System Description:**

#### Features/Benefits:

- The TRU-CLOSE Suction Drainage System is designed to be a completely closed system for abscess and other fluid drainage.
- Compact and self-contained system allows full patient ambulation.
- During activation, body fluids are not aerosolized because all fluids are contained in the system.
- Closed system design reduces the chances of crosscontamination.
- Dual anti-reflux valves prevent liquids and air from backing up into the catheter or wound drain.
- All TCS bags come with a standard luer lock connector to fit all luer-locking drainage catheters.
- In addition to the standard luer lock connector, the TCS300D and TCS500DS come with two straight connectors to be used with post surgical wound drains.
- If the bellows fills, flow to the bag continues via gravity drainage as long as the bag is below the level of the drainage site.
- o Bag sizes: 300, 500 and 1,000 ml.
- Available with empty port in the 300 ml and 500 ml sizes.

Technical Specifications						
	Catalog Number	Bag Size	Approx. Vacuum	Drain Port?	Luer Lock Fitting?	Friction Fittings?
	TCS300D	300 ml	4.5 PSI (233 mm Hg)	Yes	Yes	Yes
	TCS500DS	500 ml	4.5 PSI (233 mm Hg)	Yes	Yes	Yes
	TCS500D	500 ml	2 PSI (103 mm Hg)	Yes	Yes	No
	TCS500	500 ml	2 PSI (103 mm Hg)	No	Yes	No
	TCS1000	1,000 ml	2 PSI (103 mm Hg)	No	Yes	No

UreSil, LLC, 5418 W. Touhy Ave, Skokie, IL 60077 Tel: (800) 538-7374 Tel: (847) 982-0200 Fax: (847) 982-0106 UreSil and TRU-CLOSE are registered trademarks of UreSil, LLC.

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### Patient and Nursing Information

- 1. To adjust the tubing length, remove the tube from the top of the housing or pull off the luer lock connector and cut the tube with a scissors to the desired length (see Figure 1).
- 2. To change the luer lock connector to a straight connector for use with a silicone wound drain, cut the tube or remove the adapter and insert the desired connector (see Figure 2).
- 3. Attach the bag to the drainage catheter or wound drain.
- 4. To ensure continuous flow, attach the bag to the patient gown or bedding below the level of the drainage site.
- 5. If the bag comes with an empty port, twist it closed (see Figure 3).
- 6. To activate the system, compress the bellows completely (see Figure 4). Do not try to pump the bellows; it will fill as it draws fluid from the drainage site. If the bellows is not re-activated after filling, the system will convert to gravity drainage thus preventing fluid backup.
- 7. To re-activate the system, compress the bellows. The fluid in the bellows will be discharged into the bag and the suction will be re-established (see Figure 4).
- 8. The bag is strong enough to withstand a build up of air pressure within the bag. The bag is equipped with hydrophobic filter vents, which will vent collected air. Air can be manually forced out of the bag by gently squeezing the bag while the system is positioned vertically (housing above bag).
- 9. Although the graduation marks on the bag are approximations only, approximate volumes collected can be recorded on the white "write-on" area on the bag. When recording these approximations, first empty bellows contents into the bag.



Figure 1



Figure 2



Figure 3



Figure 4



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