

# Needlefree Connector (NIP®)

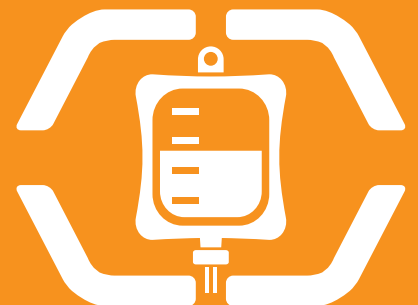
A needlefree stand-alone connector integrated with a swabbable Luer activated valve, allowing for maintenance of a fully closed connection through the entire use duration, as well as eliminating needle stick injuries.

IV Therapy is essential and common in today's medical treatment, but it increases risks of device associated infections and needle stick injuries. Needlefree alternatives can help reduce these risks.

The Needlefree Connector is a new component in our E-Safe™ product family, specially developed to provide our customers with a range of solutions to minimize line contaminations and enhance patient and caregiver safety.



Medication Delivery



 Elcam Devices

 Elcam Stopcocks

 Elcam Accessories

# Needlefree Connector (NIP®)

## Benefits

### Safety - for both patients and medical professionals

- Normally closed luer activated valve - provides full barrier protection against pathogens entering through the connector \*
- Swabbable valve – enables effective disinfection of valve surface
- Needle free connection - prevents needle-stick injuries
- Compatible with all common fluids used in IV therapy, anesthesia, monitoring, angiography, angioplasty and feeding

### Ease of use – increases compliance

- Eliminates the need for additional caps, adaptors or cannulas
- Straight fluid pathway – maximizes flow rates

## Applications

- Suitable for IV lines and anesthesia applications
- Multilumen Central Venous Catheters
- Blood sampling procedures

## Performance Characteristics

- Maximum use duration is 11 days. When using lipids, replace every 7 days
- Residual volume at the valve port - 0.14mL
- Minimum flow rate of 150 ml/min under 1 meter water column height
- Compliant with ISO 80369-7:2016
- Biocompatible according to ISO 10993-1
- Withstands pressure of 2 bars for 96 hours
- Compatible with EtO and Gamma Sterilization (up to 25 kGy)
- Not made with latex or DEHP
- Open fluid path – reduces risk of hemolysis

\* Full barrier protection is achieved with proper external disinfection of the swabbable valve with 70% alcohol swab. Proven in a 11 days trial, involving 4 different pathogens and multiple activations.



1. Normally closed luer activated valve
2. clear housing
3. Open fluid path
4. Minimal residual volume

