

Anchor Fast

Oral Endotracheal Tube Fastener

Quick Reference Care Tips

This is a quick reference guide for the application and routine care of the Anchor Fast oral endotracheal tube fastener.* The Anchor Fast tube fastener secures oral endotracheal tubes ranging in size from 5 to 10 mm in diameter.

LATEX-FREE

Application

Step 1

Prepare the skin

- Make sure the skin is clean, dry, and free of oily residue
- Do not use skin gel wipes or other brands of skin preps with the oral endotracheal tube fastener

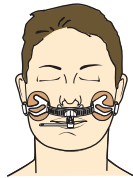
Step 2

Remove the release liners

- Remove the release liners from the two skin barrier pads

Step 3

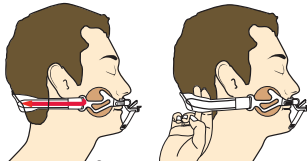
Place the device on the patient



- Center the device on the upper lip so the nonabsorbent upper lip stabilizer lightly touches the skin
- Position the one-click security clamp approximately 1/2 inch below the patient's upper lip
- Press the two skin barrier pads against the patient's skin
- Hold the device in place until the barrier pads adhere well. This should take approximately thirty seconds

Step 4

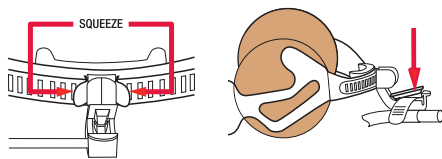
Apply the adjustable neck strap



- Insert the narrow end of the strap through the plastic loop on the track
- Fasten the narrow end of the strap using the hook and loop closure
- Adjust straps on either side for added comfort and security. **Do not overtighten**
- Allow two fingers width between the strap and the back of the patient's head

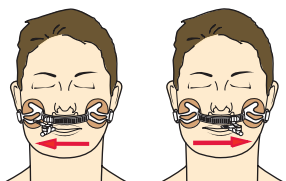
Step 5

Secure the endotracheal tube



- Squeeze the tabs on the sides of the gliding tube shuttle and move the clamp along the track to a location above the tube
- Remove the release liner from the ET tube wrap exposing the adhesive. Before applying the wrap to the tube, make sure the tube is dry and free of any residue
- Position the tube under the nonslip grippers
- Care should be taken to avoid aligning the inflation lumen directly under the nonslip grippers when securing the tube. Loop the wrap tightly around the tube, and pull the remaining portion of the wrap through the security clamp
- Secure the wrap by snapping the one-click security clamp shut (an audible click will be heard)

Routine Care



- To reposition the tube, squeeze the shuttle tabs on the outer edges and move in either direction along the tube track
- Reposition the tube side to side at least every two hours,^{1,2} or more frequently if the patient's condition dictates, to minimize the risk of injury to the skin and/or lips from unrelieved pressure

Visit www.hollister.com to view video instructions for product application.

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Precautions

- The oral endotracheal tube fastener has been evaluated in an adult population. This product is not intended for use with pediatric (paediatric) patients.
 - Use caution in patients with full or swollen lips, dental appliances, facial swelling, and/or protruding teeth.
 - Patients without front upper teeth or unable to wear upper dentures may lack the maxillary support required to use the oral endotracheal tube fastener.
 - Patients with facial hair may lack the necessary support to anchor the skin barrier pads.
 - After application of the oral endotracheal tube fastener, check the patient frequently to ensure that both the oral endotracheal tube fastener and the endotracheal tube are secure and correctly positioned.
 - To minimize the risk of pressure injury, inspect the patient's lips and skin at least every two hours^{1,2} or more frequently if the patient's condition dictates.
 - Discontinue use of the device if redness or skin irritation occurs.
 - Repeated adjustment of the endotracheal tube in a distal or proximal direction may affect the performance of the ET tube wrap.
 - Care should be taken to avoid aligning the inflation lumen directly under the non-slip grippers when securing the tube.
 - The oral endotracheal tube fastener is indicated for single use. **To help ensure proper adhesion, do not reuse.**
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For detailed clinical questions concerning our products: 1.888.740.8999 • **For orders only:** 1.800.323.4060

References

1. Pieper, Barbara. "Mechanical Forces: Pressure, Shear, and Friction." Chapter 12 in *Acute & Chronic Wounds: Nursing Management*, 3rd ed., ed. Ruth A. Bryant (St. Louis, Mosby, Inc. 2007).
2. Panel for the Prediction of Prevention of Pressure Ulcers in Adults. "Pressure ulcer in Adults: Prediction Prevention." *Clinical Practice Guidelines*, Number 3, AHCPR Publication No. 92-0047. (Rockville, MD: Agency for Health Care Policy and Research, Public Health Service, U.S. Dept. of Health and Human Services. May 1992.)



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