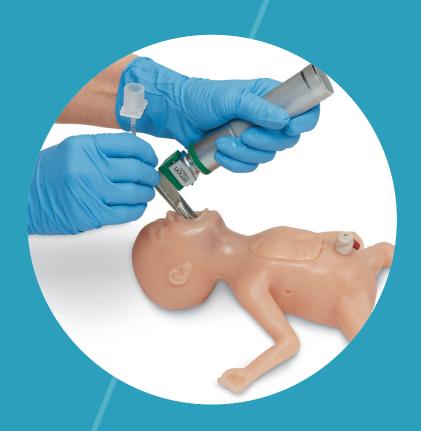
## INSTRUCTION MANUAL

# **Micro-Preemie**

LF01280 & LF01281





### **About the Simulator**



The Nasco Healthcare manikin represents a 25-week neonate. The soft, flexible body and a variety of built-in features make this a very lifelike and easy-to-use training aid for many scenarios.

#### LIST OF COMPONENTS

- A. Micro-Preemie Manikin (LF01280 – Light) or (LF01281 – Dark)
- **B**. Preemie Hat
- C. Preemie Diaper
- **D.** 3 cc Syringe with Needle
- E. ½-oz. Lubricant
- F. 25-ga. Butterfly Infusion Set
- **G**. Blood Powder with Spoon
- H. Umbilical Cord

- I. Replaceable Airway (2 total, 1 installed in image)
- J. Neural Tube Defect
- K. Omphalocele
- L. Bilateral Chest Block
- M. Unilateral Chest Block
- N. Removable Ostomy
- O. Warranty Document (not pictured)





#### **SETUP**

#### A. INSTALLING THE REPLACEABLE AIRWAY

- 1. Remove the installed lung block, if applicable, from the baby's chest. (See Figure 1.)
- 2. Thoroughly lubricate all of the outside surfaces of the airway and around the baby's mouth.
- **3**. Gently insert your lubricated finger into the airway over the tongue and epiglottis.
- Push the tube end of the airway into the baby's lubricated mouth. (See Figure 2.)
- 5. Work your fingers around the inside of the mouth, freeing the baby's lips. Be sure the airway is fully installed.

### **Set Up**

#### **B. LUNG BLOCKS**

- Two different lung blocks have been provided a normal block simulating bilateral expansion of the lungs, and a second block simulating a collapsed right lung. The two blocks can be identified by the molded diagram on the back.
- To install either lung block, ensure the airway is installed (See "A. Installing theReplaceable Airway" for more information).
- **3.** Apply a small amount of lubricant to the short tubing section of the airway that projects into the chest cavity.
- Insert the lubricated tubing section into the hole at the top of the lung block.
   (See Figure 3.)

Figure 3

5. Fit the lung block into the chest cavity.

#### C. PATENT UMBILICUS

The umbilical stump has one functional vessel and functions like a plug that fits into the small reservoir within the abdomen.

#### D. OSTOMY

The nonfunctional stoma can be positioned externally, or pulled out and reinserted with the skin side up.

### GENERAL INSTRUCTIONS FOR USE AIRWAY AND VENTILATION

The baby will accept a functioning 2.5 mm I.D. endotracheal tube (not included) with #0 Miller Blade. The lubricated tube must be placed into the throat to produce a visible chest rise. Do not administer fluids through the mouth. BVM can also be used to produce a chest rise.

#### GI

The left nostril will accept a 5 Fr nasogastric feeding tube (not provided). Fluids passed through the NG tube will enter an embedded tube located under the chest block. Fluid administration is not recommended. Any fluid administered must be suctioned out. The embedded tube is approximately 1-2 cc. Use water only, not formula. Always drain the system completelyn when training is complete.





#### **UMBILICUS**

The reservoir can be used to either draw or receive fluids. Maximum capacity is approximately 5 cc. Do not overfill. Always use plain water, with or without the blood powder provided. (Caution: Blood mixture will stain skin and fabric.) (See Figures 4 & 5.) Always flush and drain the system thoroughly and store with the plug hole open so the reservoir can dry.

### Set Up

#### **IV SITES**

The Micro-Preemie has four molded-in sites typically used for peripheral IV access: right scalp, right foot, left arm, and left hand. All four will accept an infusion device, but none of the sites are functional.

**Note:** The soft material of this manikin is self- healing and will accept a small gauge needle anywhere on the body. Before insertion, make certain that the needle will not damage any underlying structures.

Over time, repeated punctures, especially in the same area, will result in damage to the simulator. Nasco Healthcare warranty does not cover damage caused by needle insertion.

#### **CHEST TUBE**

A permanent site in the baby's right side will accept a nonfunctioning 8-10 FR chest tube for placement and care practice.





# PRESSURE ULCERS The manikin shows several typical sites of skin breakdown: occiput and heels. (See Figures 6 & 7.)





#### **BIRTH DEFECTS**

#### A. Omphalocele

The umbilicus may be replaced with the omphalocele for specialized training. Ensure the abdominal reservoir is empty. The omphalocele is nonfunctional. (See Figure 8.)

B. Myelomeningocele (Neural Tube Defect) The optional structure may be plugged into the small opening in the back of the Micro-Preemie. (See Figure 9.)

#### **OTHER**

Various monitors and sensors may be connected to the Micro-Preemie just as they would be to a real infant.

#### **CARE OF THE SIMULATOR**

- Nasco Micro-Preemie material is soft but durable and will last a long time with proper care.
- While the arms and legs are very flexible, avoid forcing them into extreme positions.
- The manikin is completely immersible in water and may be washed with mild soap or detergent if soiled.
- · Always allow all components to dry thoroughly before strage.
- Baby powder can be applied to the baby and its components for a less tacky skin surface.

#### **AVAILABLE SUPPLIES/REPLACEMENT PARTS FOR MICRO-PREEMIE**

**LF01206(A)** Consumables Kit: 5 diapers, blood pack, 3 cc spoon,

and lubricant

LF01211 Micro-Preemie Hat (colors vary)
LF01282 Bilateral Chest Block (light)
LF01283 Unilateral Chest Block (light)

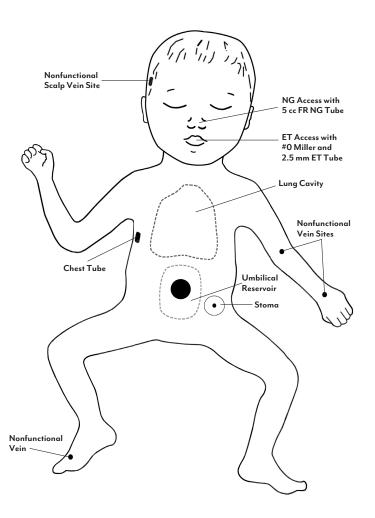
LF01284 Airway Micro-Preemie

LF01286

**LF01285** Micro-Preemie Kit (umbilical cord, 2 defects)

Bilateral Chest Block (dark)

LF01287 Unilateral Chest Block (dark)
LF01288 Stoma (light), pkg. of 5
LF01289 Stoma (dark), pkg. of 5
LF03461 Small, Soft Carry Bag





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