

Doppler

BLOOD FLOW MONITORING SYSTEM

Troubleshooting in the operating theatre

If you cannot hear the sound of blood flow:

1. Irrigate around the probe with saline.
The flow of the irrigation fluid over the probe should generate sound and confirm that the probe is functioning.
2. If irrigation confirms that the probe is functioning, check to see if the lack of Doppler signal indicates one of the following:
 - A low flow state in the flap or a drop in systemic blood pressure
 - A loose probe, which can be confirmed by pressing the probe and checking for tightness
3. If there is still no sound after the previous steps have been followed, palpate the vessel near the location of the probe to check for flow.

Note: When attaching the probe to the vessel, be careful to allow a natural pathway for the wire from the crystal to the monitor. Make sure there is no tension in the probe wire, tension may prevent the probe from sitting flush against the vessel.

Troubleshooting outside the operating theatre

If you cannot hear the sound of blood flow:

1. Consider repositioning the patient.
2. Press or palpate the patient near the probe site to improve the crystal's contact with the blood vessel.
3. Make sure you have selected the proper channel.
4. Test the operation of the monitor by pressing the 'test' button and listening for the tone.
5. Use the channel/cable verifier to make sure that the channel you plugged the extension cable into is operational.
6. Use the channel/cable verifier to make sure that your extension cable is operational.

If the unit is functioning correctly and you still cannot hear the sound of blood flow, contact the physician immediately.

Removing the probe

After the physician has determined that the flap has permanently established blood flow, follow these steps to remove the probe:

1. Remove sutures (and/or tape) from the wire outside the wound and from the retention tabs.
2. Tug gently on the wire near the skin to disengage the crystal from the cuff. (As little as 0.2 lb of pressure will disengage the crystal from the cuff.)
3. Once the crystal is free from the cuff, gently remove the entire probe from the wound. The silicone cuff will remain in place around the vessel.

Note: Alternative methods of discontinuing use of the probe, such as cutting the wire and tucking it into the wound, are not recommended and are contrary to approved Instructions for Use. See the IFU for full operating instructions.



Scan to watch our
instructional videos

or visit cookmedical.eu/dopplervideo.

Doppler Blood Flow Monitoring System

Used for monitoring blood flow in vessels intraoperatively, and following reconstructive microvascular procedures, reimplantation, and free-flap transfers.

Low battery LED

This light indicates when the unit has a low battery.

Flow indication lights

Although audio output is the primary indicator of blood flow in the vessel you are monitoring, these lights also indicate blood flow within that vessel.

Test

Press and hold this button. A steady tone indicates the unit is functioning properly.

Channel select

Select which of the two connection channels you wish to monitor.

Connection jacks

Input ports for one or two Cook-Swartz Doppler Probes. The red marks on the connector of the extension cable must align with the red marks on the connection jack. Only one connection jack is operable at a time.

Power switch

Turn the unit on and off.

Volume control

Adjust the loudness of the audio output.

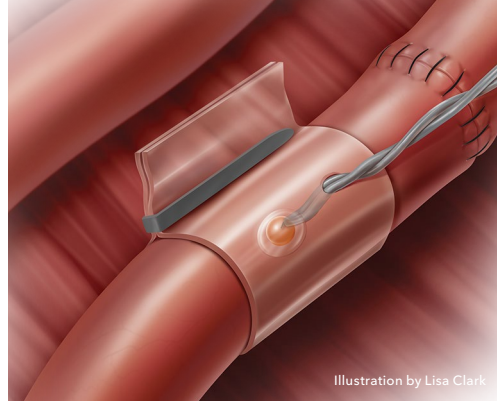


Illustration by Lisa Clark



Cook-Swartz Doppler Probe



Probe Extension Cable



Monitor Battery Charger



Doppler Channel/Cable Verifier

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