



CENTURION
MEDICAL PRODUCTS



**PRECISE PRESSURE
MADE SIMPLE.**

Compass for Central Line Insertion

Preventing inadvertent arterial cannulation

HOW CLOSE ARE YOU TO AN INADVERTANT ARTERIAL CANNULATION?

Ultrasound alone cannot prevent all inadvertent arterial cannulations.

Once you set down or turn off the ultrasound, you are blind to what could happen next. As little as 1 mm of movement can cause the introducer needle to accidentally migrate into an artery. If cannulated, your patient could rapidly bleed out or require unplanned surgery.



- » A Mayo Clinic study found ultrasound guidance (USG) did not, with any statistical significance, reduce complications with central venous catheter (CVC) placement. Pressure transducers were effective.
- » A year-long, multi-hospital study of 4 academic medical centres using ultrasound with Compass revealed:
 - Of 298 CVCs placed, 5 inadvertent arterial punctures occurred, even with the use of ultrasound.
 - The added use of Compass prevented arterial cannulation in all of those incidents.
- » A University of Washington meta-analysis highlighted that with USG, needle and wire are not always visualised in the vein, and movement and needle migration outside the vein still occur.

- » In a study of 1,172 CVC placements, pressure transduction correctly identified all the arterial punctures, and there were no cases of inadvertent arterial cannulation.

What is the impact of a 1% failure rate?

If 1% of all cars were manufactured without steering or brakes, no one would drive. Why should we accept a 1% failure rate in placing CVCs?

- » 5,000,000+ CVCs are placed annually in the United States. That's about 13,700 per day or nearly 600 per hour, around the clock.
- » A 1% failure rate means the lives of nearly 1,000 people are endangered every week.

Now consider the sheer volume of CVCs you place each year. Would you be content with a 1% failure rate?

Pressure verification is the recommended preventive measure for inadvertent arterial cannulation.

Avoiding potential disaster

Blood colour and pulsatility are not reliable indicators of proper central line placement, but instantaneous pressure verification is. Even with the guidance of ultrasound, insertion of central lines still results in inadvertent arterial cannulation up to 1% of the time. In the moment of decision, confirmation of venous placement is now possible.

Confidence in the moment

The single-use Compass provides a simple, precise, indisputable digital pressure reading instantly. Venous placement of the needle and guidewire can be confirmed continuously as needed—no more guesswork, no more blind spots.

**Good for you, great for your patients:
Compass, Precise Pressure Made Simple**



VEIN



ARTERY

Product features

- » Enables continuous pressure verification during placement to confirm needle tip location
- » Compatible with almost all syringes, any gauge needle and all luer connections
- » The guidewire port enables continuous pressure verification during wire insertion and advancement
- » Meets American Society of Anesthesiologists' guidelines to enhance patient safety
- » Allows for measurement of CVP as needed after insertion for a septic patient
- » Closed system enables bloodless technique



For more information on this product, please contact your Medline account manager or visit our website: www.medline.eu/uk



**ALWAYS
ON.**

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These products are class IIa medical devices intended to be used by healthcare professionals. Before use, consult instructions and precautions on the corresponding labelling.

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