

WARNING: After use, this product may be a potential biohazard. Handle and dispose of in accordance with acceptable medical practice and applicable local, state, and federal laws and regulations.

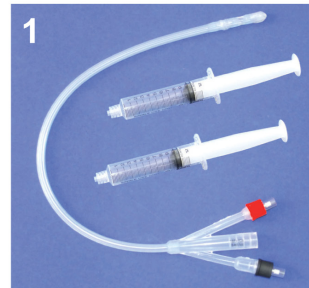
STOP: IS THERE A VALID CLINICAL REASON TO CATHETERIZE?

PREPARATION:

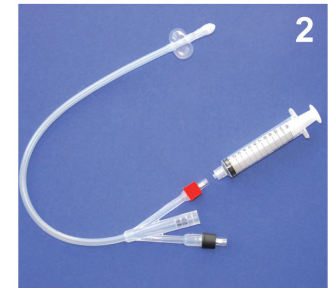
1. Visually inspect the product for any imperfections or surface deterioration prior to use. If package is opened or if any imperfection or surface deterioration is observed, do not use.
2. Gather required materials:
Two 10 ml/cc syringes filled with sterile water.
3. Wash hands before and after the procedure.

DIRECTIONS FOR INSERTION:

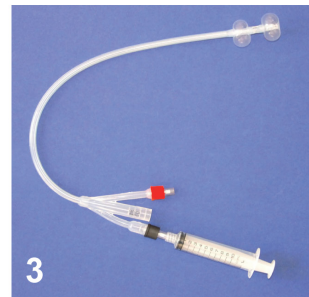
1. Insert catheter according to institution guidelines.
2. Insert one of the 10ml/cc syringes into the Size Color Coded **Non-BLACK** inflation/deflation port. Slowly depress syringe plunger to fill the proximal retention balloon with approximately **10ml/cc** of sterile water, then remove the syringe.
3. Insert the second 10ml/cc syringe into the **BLACK** inflation/deflation port. Slowly depress syringe plunger to fill the distal balloon with approximately **5ml/cc** of Sterile water, then remove the syringe.



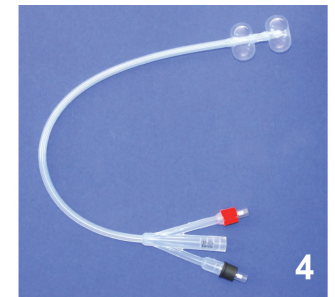
Installation of Duette™ requires two 10ml/cc syringes.



Use **Non-Black** port to inflate proximal balloon with **10cc/ml** of water.



Use **Black** port to inflate distal/tip balloon with **5cc/ml** of water.



Twin-balloon, zero-tip design protects the bladder from trauma.

DIRECTIONS FOR REMOVAL:

1. Deflate balloon by gently inserting a luer slip syringe into the Size Color Coded **Non-BLACK** inflation/deflation port, allowing water to flow into the syringe barrel. Never use more force than required to make the syringe "stick" in the valve. If slow or no deflation occurs, gentle aspiration may be necessary.
2. Empty syringe and insert into **BLACK** inflation/ deflation port. Repeat deflation process.
3. Remove catheter according to Institution guidelines.

CAUTION:

Vigorous aspiration may collapse the inflation lumen and prevent balloon deflation. If no deflation occurs, the valve arm may be severed if permitted by institution protocol. If this fails, qualified personnel should be contacted for assistance.

DO NOT aspirate urine through the drainage funnel wall. Inflate balloons using luer slip-adaptor syringe.

DO NOT use needles. Maximum catheter inflation capacity with sterile water: 10 ml/cc per balloon.

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