APPLICATION

Prep well **beyond** entire dressing site according to facility protocol to ensure dressing adherence. **Allow prep to dry completely.** This usually takes less than one minute. Note: If the prep doesn’t dry completely, the integrity and security of the dressing may be compromised. A skin protectant may be used according to preference or protocol. **Allow skin protectant to dry completely.**

Note: Liner has a label attached that can be used later to record information. Remove larger liner without touching adhesive (set aside liner). Center the insertion site in window and turn dressing to align the notch with tubing at triangular base (**Figure A**). Adhere dressing to skin.

Remove remaining liner and guide the tubing out through notch. Pinch the edges of the notch together to form a seal (**Figure B1**). Exit site edges should be touching or overlapping (**Figure B**). From center outward, firmly smooth down entire dressing to ensure all edges are adhered well.

Without removing the liner, slip the closure piece **under** tubing and **over** edge of dressing (**Figure C**). Remove the liner one side at a time and smooth down to adhere.

Record information on label, remove from liner and position label on the edge of the dressing.

REMOVAL

Optional: A tape strip may be used to secure catheter tubing during removal (**Figure D**).

Locate v-notch on outer edge of closure piece (**Figure D**) and pull apart in opposite directions to break center perforations (**Figure E**).

Holding the catheter in place, gently peel back closure piece and dressing together as one. Peel back slowly, keeping dressing close to the skin, follow catheter toward insertion site (**Figure F**).

Optional: Use an alcohol prep pad **underneath** dressing while peeling back to help deactivate the adhesive.

---

SorbaView SHIELD and SHIELD Technology are the proprietary property of Centurion Medical Products. SorbaView SHIELD is only available in sterile individual packs or sterile trays manufactured by Centurion Medical Products.