**Placement of Bridge on In-Use Pediatric Circuit**

(To be used for trial off of ECLS)

Equipment:

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| * ¼” bridge tubing with | * Pigtail clamp (x1) |
| 1 stopcock | * 3/8” tubing clamps (x2) |
| * Non-venting cap * 10ml sterile NS syringe | * ¼” tubing clamp (x1) |

Steps to insert bridge (with sterile hat, mask, and gloves):

1. Open ¼” bridge tubing (should be located on shelf under Cardio Help).
2. Bridge comes with 2 stopcocks, remove one and leave one in place.
3. Attach 10ml sterile NS syringe to stopcock, hold so stopcock is on bottom of bridge and open end of bridge is pointing up. Flush to prime tubing then clamp open end with ¼” tubing clamp and turn stopcock OFF.
4. Remove syringe and replace with non-venting cap.
5. On circuit venous leur, remove pigtail with syringe.
6. Attach clamped end of bridge to stopcock on venous leur (airless technique).
7. Replace pigtail with syringe on side port of stopcock on venous leur.
8. Remove clamp from bridge.

\*\* Next patient will need to come **OFF OF ECLS SUPPORT** to connect to arterial side \*\*

1. Alert bedside team that you are coming off ECLS support.
2. Place one 3/8” clamp on each side of the arterial leur.
3. Attach bridge stopcock (airless technique).
4. Move arterial bubble detector to distal (patient side) of bridge.
5. Once bridge in place, remove proximal (circuit side) ATERIAL clamp and place on distal (patient side) of VENOUS leur.
6. Open bridge by turning both stopcocks to be OFF to extra port.
7. Remove yellow deairing cap.
8. Increase RPMS to briefly flow through the bridge to remove any residual air. Visually check system for trapped bubbles.
9. After no evidence of residual air, remove venous clamp and slowly remove arterial clamp (watching for air).
10. Close both stopcocks **OFF to the CIRCUIT**.
11. Adjust RPMS to achieve goal flows to patient.
12. You are back on ECLS support.
13. Replace yellow cap