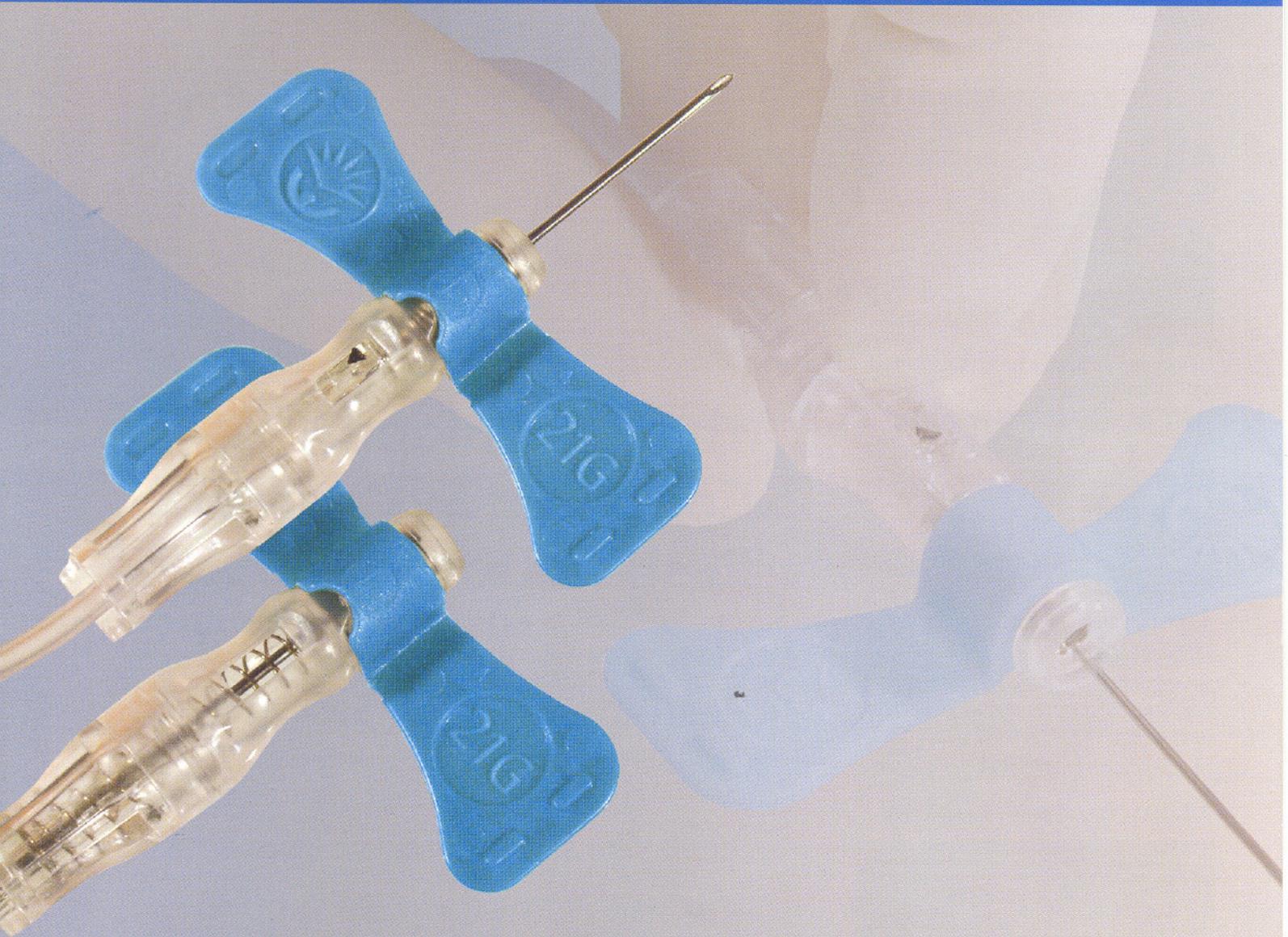


BD Vacutainer® Push Button Blood Collection Set

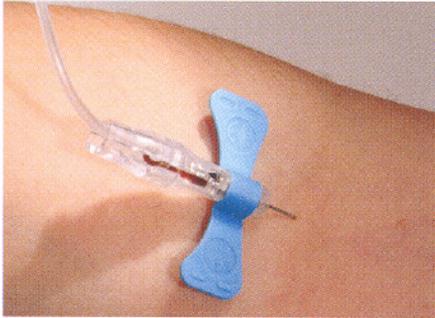


Split-Second Protection

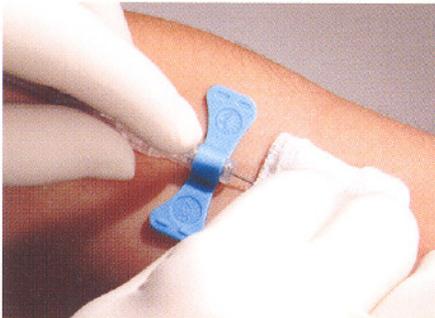
Eliminate the risk before it even exists!

BD Vacutainer® Push Button Blood Collection Set

Split-Second Protection



Flash visualisation confirms venous access

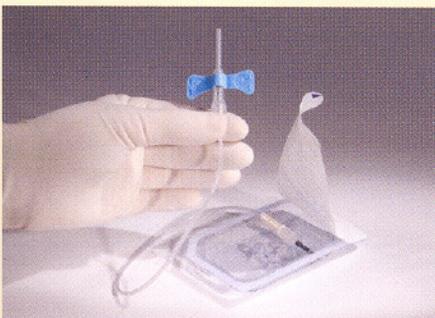


Easy in-vein activation without additional patient discomfort

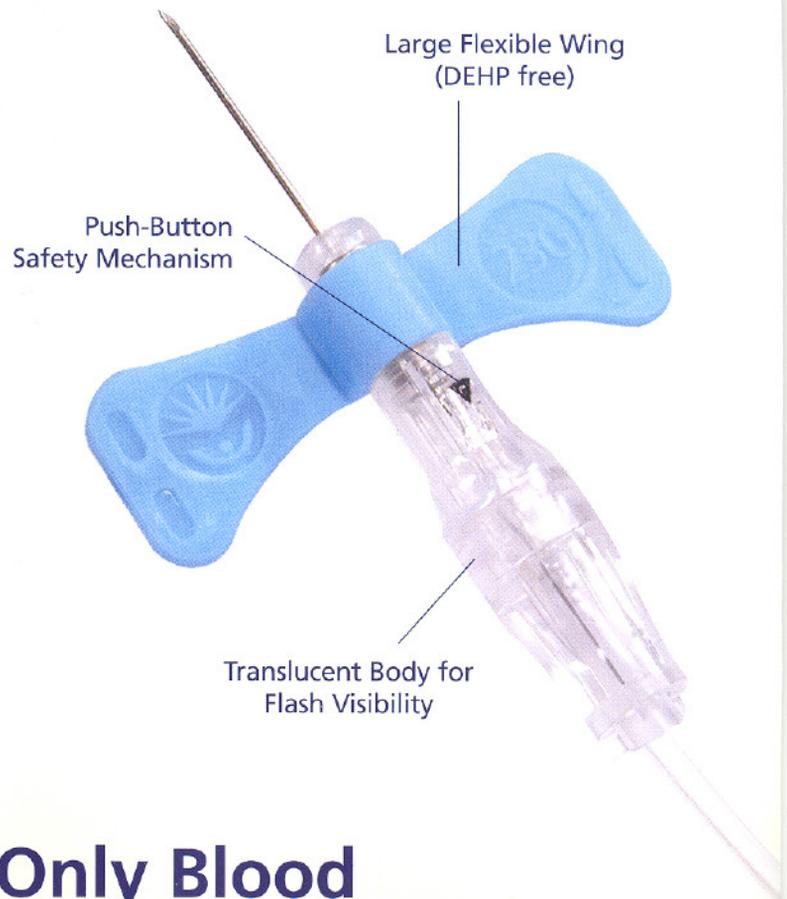


Needle retracts from the vein and locks into place, offering immediate protection against needlestick injury

Memory-free tubing



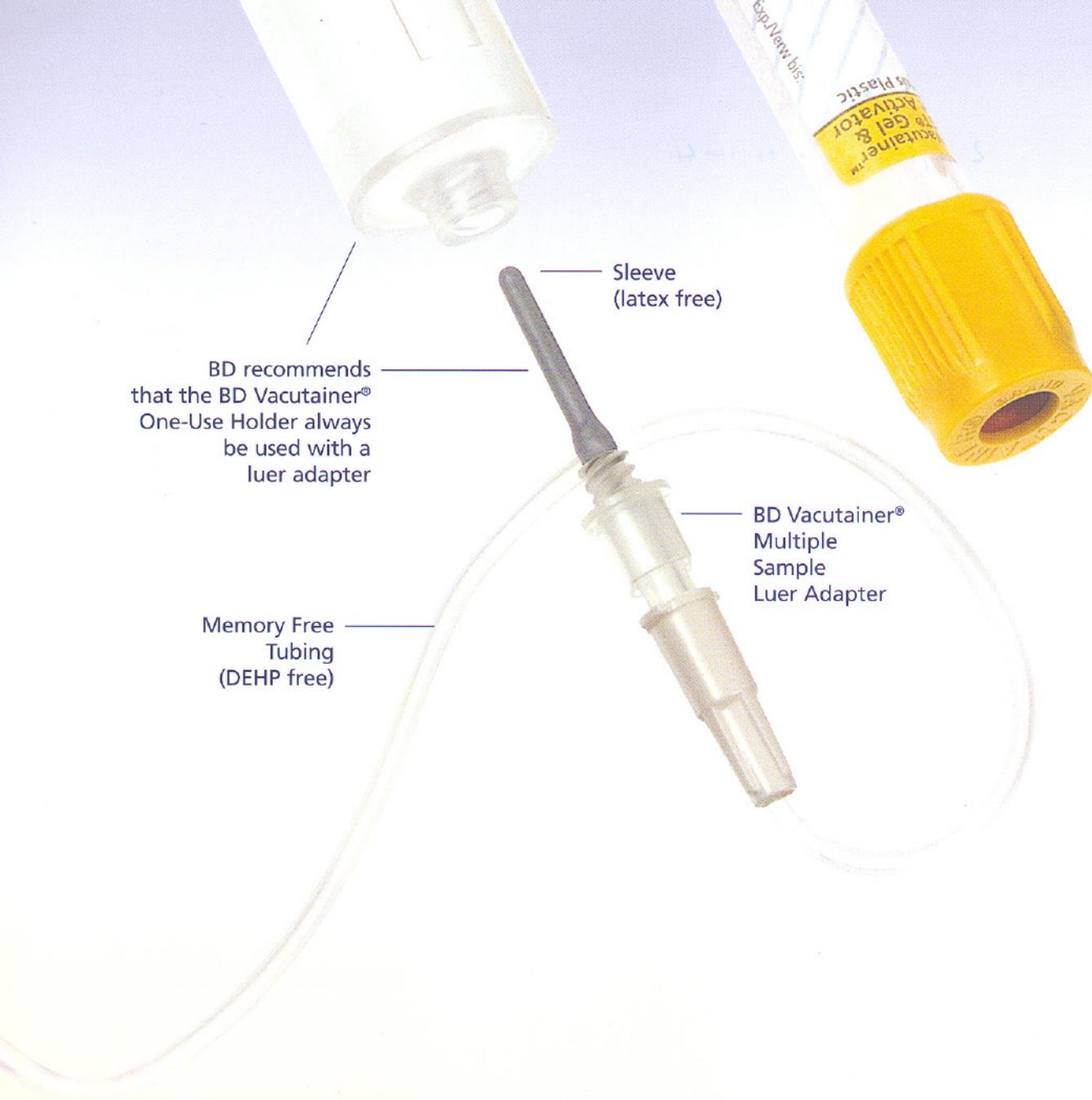
Tubing does not coil or curl



The Only Blood Collection System with Push-Button Technology

Designed to Significantly Increase **Healthcare Worker Safety**

The BD Vacutainer® Push Button Blood Collection Set offers split-second protection for that single moment which could potentially change your life. The push-button safety mechanism instantly helps protect you against needlestick injury.



Designed to effectively reduce needlestick injuries

The Healthcare Worker is most at risk at sustaining a needlestick injury after use of a sharp.¹

A CDC study showed that 61% of exposures occur within the first few seconds, when the needle is removed from the patient's vein.²

Preventing needlestick injuries during use is harder to achieve as they usually occur during insertion or withdrawal of the needle or when the patient moves unexpectedly.¹

If a safety device is used, most needlestick injuries occur because the Healthcare Worker has not activated it or because two hands were necessary to do so.¹

In needlesticks to Phlebotomists involving a safety-engineered blood collection set, the safety mechanism was not activated in 80.8% of cases. In addition, 52% of the injuries occurred during or after activation.³

In-vein activation of the Push Button safety mechanism instantly protects you against needlestick injury and eliminates the risk before it even exists.

1. Abiteboul D, et al. Incidence des accidents exposant au sang chez le personnel infirmier en France métropolitaine, 1999-2000. Résultats d'une enquête multi-centrique dans 32 hôpitaux. BEH No 51, 2002
2. CDC, MMWR, Jan. 1997. Evaluation of safety devices for preventing percutaneous injuries among HCWs during phlebotomy procedures
3. EPINet. Summary report for needlestick and sharp object exposure:category nurse-device: 5 needle, winged steel; Jan - Dec 2003

Designed to effectively reduce needlestick injuries

Safety with the push of a button

- Provides immediate protection against needlestick injury
- Ease of use reduces training requirements

In-vein needle retraction

- In-vein activation reduces the risk of healthcare worker exposure to a contaminated needle
- Easy activation without additional patient discomfort
- Ideal for use in high-risk environments

One-handed safety activation

- Allows for easy activation of the safety mechanism while attending to the patient / venipuncture site
- Easier, safer blood collection for the healthcare worker, with no compromise to patient care

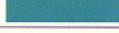
Clinical Use

- Intended for blood collection and short-term infusion
- BD Vacutainer® Push Button Blood Collection Set is available with and without luer adapter.

Additional safety elements

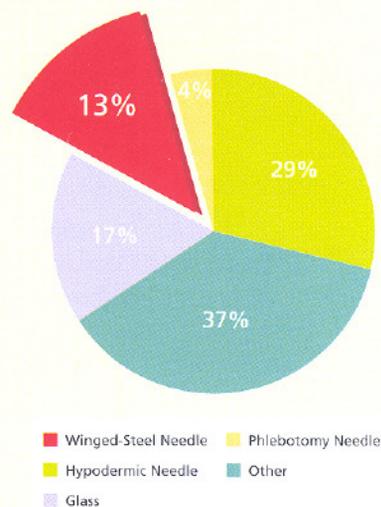
- Does not contain latex
- Does not contain DEHP

Ordering Information

PCN	Gauge	Colour code	Tubing length	Luer adapter	Packaging
367338	21		7" - 178mm	with luer	50/200
367336	23		7" - 178mm	with luer	50/200
367335	25		7" - 178mm	with luer	50/200
367344	21		12" - 305mm	with luer	50/200
367342	23		12" - 305mm	with luer	50/200
367341	25		12" - 305mm	with luer	50/200
367326	21		12" - 305mm	without luer	50/200
367324	23		12" - 305mm	without luer	50/200
367323	25		12" - 305mm	without luer	50/200

CAUTION: Handle all biologic samples and blood collection "sharps" (lancets, needles, luer adapters, and blood collection sets) in accordance with the policies and procedures of your facility. Obtain appropriate medical attention in the event of any exposure to biologic samples (e.g., through a puncture injury) since samples may transmit viral hepatitis, HIV (AIDS), or other infectious diseases. Utilize any safety-engineered feature if the blood collection device provides one. Discard all blood collection "sharps" in biohazard containers approved for their disposal.

Devices associated with percutaneous injuries



Jagger, Janine et al. "Rates of Needlestick Injury Caused by Various Devices in a University Hospital." *The New England Journal of Medicine* 319.5 (1988): 285-288

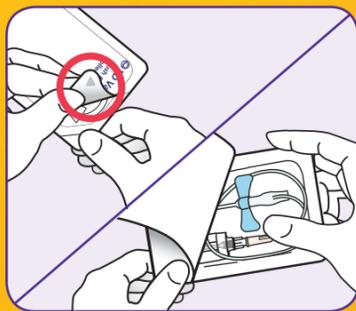


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BD Vacutainer® Push Button Blood Collection Set with Pre-Attached Holder

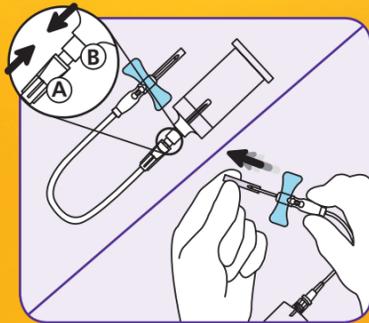
Safety from End to End

General Use and Disposal (See package Insert for detailed directions for use)



1a Peel back packaging at arrow so that the back end of the wing set is exposed.

1b With thumb and middle finger, grasp the rear barrel of the wingset and remove from package. Be careful to avoid activating the button.



2a Check to ensure that the Female Luer Adapter (A) is securely attached to the Male Luer Adapter (B).

2b Remove needle sheath.

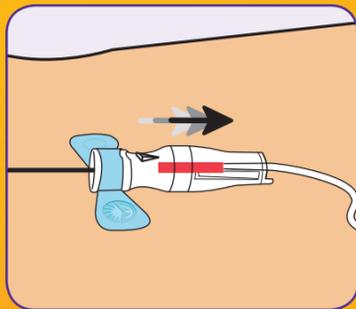


3a With thumb and index finger, grasp the wings together and access vein using standard needle insertion technique.

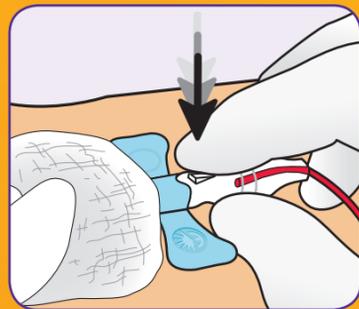
OR



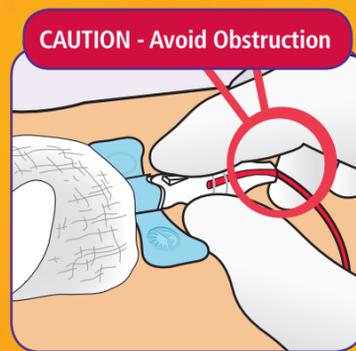
3b If preferred by your institution, the body of the device can be held, instead of the wings, during insertion.



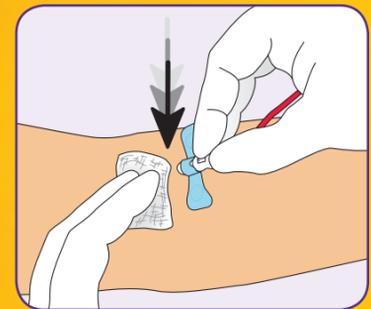
4 Proper access to the vein will be indicated by the presence of "flash" directly behind and below the button.



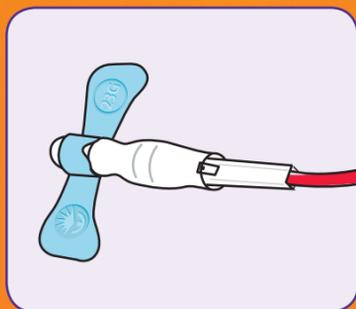
5a The device is designed to be activated while the needle is still in the patient's vein. Place your gauze pad on the venipuncture site. Allow gauze pad to cover nose of front barrel. Following the collection procedure, and while the needle is still in the vein, grasp the body with the thumb and middle finger. Activate the button with the tip of the index finger. Do not activate with thumb.



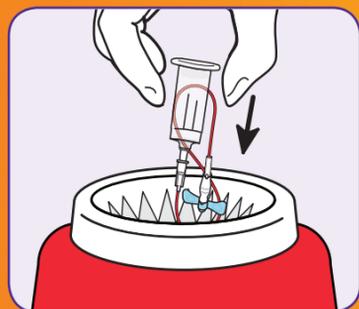
5b To ensure complete and immediate retraction of device, make sure to keep fingers and hands away from the end of the blood collection set during retraction. Do not impede retraction.



6 Apply pressure to the venipuncture site in accordance with your facility's protocol.



7 Confirm that the needle is in the shielded position prior to disposal.



8 Discard the entire shielded blood collection set and holder into an approved sharps disposal container.

Ordering Information

BD Vacutainer® Push Button Blood Collection Sets with Pre-Attached Holder

Reference Number	Needle Gauge	Wing Color	Tubing Length	Configuration	Packaging
367352	21	21G	12"	with holder	20/Box 100/Case
368656	23	23G	12"	with holder	20/Box 100/Case
368659	25	25G	12"	with holder	20/Box 100/Case

BD Vacutainer® Push Button Blood Collection Sets

367338	21	21G	7"	with luer	50/Box 200/Case
367344	21	21G	12"	with luer	50/Box 200/Case
367326	21	21G	12"	without luer	50/Box 200/Case
367336	23	23G	7"	with luer	50/Box 200/Case
367342	23	23G	12"	with luer	50/Box 200/Case
367324	23	23G	12"	without luer	50/Box 200/Case
367335	25	25G	7"	with luer	50/Box 200/Case
367341	25	25G	12"	with luer	50/Box 200/Case
367323	25	25G	12"	without luer	50/Box 200/Case

CAUTION:

Handle all biologic samples and blood collection "sharps" (lancets, needles, luer adapters, and blood collection sets) in accordance with the policies and procedures of your facility. Obtain appropriate medical attention in the event of any exposure to biologic samples (e.g., through a puncture injury) since samples may transmit viral hepatitis, HIV (AIDS), or other infectious diseases. Utilize any safety engineered feature if the blood collection device provides one. Discard all blood collection "sharps" in biohazard containers approved for their disposal.



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Use of Safety Blood Collection Sets in the Nursing Environment

Facts About the Dangers of Needlesticks
and the Costs Associated with Them

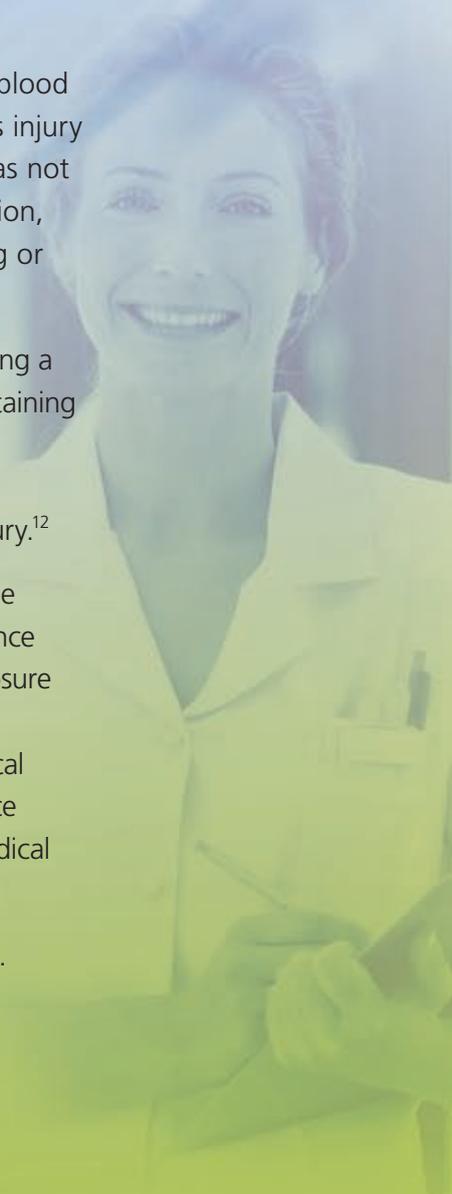


Helping all people
live healthy lives



Some Recent Facts About Needlesticks in the Nursing Environment

- It is estimated that the total U.S. annual rate of healthcare worker injuries that involve contaminated sharps is close to 650,000.¹ This estimate took into consideration the rate of percutaneous injury underreporting, which can in certain settings be as high as 73%.²
- The CDC estimates that every year more than 200 healthcare professionals die of work-acquired diseases, mostly hepatitis.³
- Over one-third (37.8%) of reported needlesticks are incurred by nurses.⁴
- 16% of all injuries sustained by nurses occurred while collecting a venous sample.⁵
- A study of the Johns Hopkins Hospital emergency room determined the prevalence of the HCV, HBV and HIV in blood samples from 2523 patients.⁶ Twenty-four percent were infected with one of the three viruses. Of those patients:
 - » 18% were seropositive for HCV
 - » 5% were seropositive for HBV
 - » 6% were seropositive for HIV
- The risk of becoming infected with HBV from a needlestick is as high as 30%, hepatitis C (HCV) is as high as 7%, and HIV is 0.3%.⁷
- Hepatitis C is now the leading reason for liver transplantation in the US.⁸
- Studies have documented the transmission of at least 30 different pathogens by accidental needlesticks.⁹
- A CDC study showed that 61% of percutaneous injuries occurred within seconds after the device was removed from the vein (e.g., before activation of the safety feature was possible).¹⁰
- In needlesticks to nurses involving a blood collection set with engineered sharps injury prevention, the safety mechanism was not activated in 74.4% of cases. In addition, 38.1% of the injuries occurred during or after activation.¹¹
- In 50% of the injuries to nurses involving a blood collection set, the individual sustaining the injury felt that other engineering protection, administrative controls or practices could have prevented the injury.¹²
- There are really no “minor” bloodborne pathogen exposures. Even in the absence of transmission of infection, each exposure event may subject workers to time consuming, stressful and painful medical follow-up, while employers or insurance companies must pay for expensive medical and compensation claims.¹³
- Behind each statistic is a human face.



...And Some Recent Facts About the Costs Associated with Needlestick Injuries

- The value of needlestick prevention is going up, as the cost of medical management of the injuries that occur will necessarily go up as new drugs are developed for new and existing bloodborne infections.¹³
- The medical cost alone of these largely preventable injuries is between \$540 and \$3,800 per incident,¹⁴ however recent EPI[™] data suggests that costs due to injuries involving blood collection sets can exceed \$5,000.¹²
- The cost of long-term medical complications, disability payments, lost wages, worker's compensation and insurance costs, lost work time, emotional distress suffered by injured workers, and potential legal liability can significantly increase the expense.
- In the case of hepatitis, a liver transplant can cost \$314,000 or more.¹⁵
- OSHA fines may be as high as \$11,340 per incident.¹⁶

"The BD Vacutainer® Push Button Blood Collection Set—what a gift to nursing! Its ease of use has increased caregiver satisfaction. What else could I ask for? Thank you, BD!"

Rosemary Linacre, RN,
Director of Value Analysis
Emory HealthCare, Atlanta, GA
August 2005
Started Using PBBCS
in December 2003

"We normally had three needlesticks a month. With the Push Button, since March 2004, I probably only have had four—in staff members who neglected to push the button."

Susan Sutherland – Health Services,
University of California-Davis Medical Center
August 2005
Started Using PBBCS in March 2004

"The safety of our staff is the first consideration for us. Since we've had the BD Vacutainer® Push Button Blood Collection Set, we have had no needlestick injuries! This single change to Push Button Blood Collection Sets has made an amazing change in our hospital."

Betty Ann Vencill, MBA, MT (ASP), CLS,
Safety Officer
Memorial Medical Center Laboratory, Modesto, CA
August 2005
Started Using PBBCS in August 2004

How the BD Vacutainer® Push Button Blood Collection Set Can Help Keep You and Your Staff Safe

- The BD Vacutainer® Push Button Blood Collection Set offers split-second protection for that single moment which could potentially change your life.
- In-vein activation of the push-button safety mechanism instantly helps protect you against needlestick injury.
- Ease of use reduces training requirements and is designed to improve activation compliance.
- In-vein activation reduces the risk of healthcare worker exposure to a contaminated needle without additional patient discomfort.
- Ideal for use in high-risk environments.
- One-handed safety activation allows for easy activation of the safety mechanism while attending to the patient/venipuncture site.
- Easier, safer blood collection for the healthcare worker, with no compromise to patient care.



The Only Blood Collection System
with Push-Button Technology Designed
to Significantly Increase Healthcare
Worker Safety and Help You
Comply with OSHA Regulations

- 1 Perry J, Jagger J. Healthcare worker blood exposure risks: correcting some outdated statistics. *Adv Exposure Prev.* 2003;6:28-31.
- 2 Alvarado F, Panlilio A, Cardo D, NaSH Surveillance Group. Percutaneous injury reporting in U.S. hospitals, 1998 [abstract]. *Infect Control Hosp Epidemiol.* 2000;21:106.
- 3 Jagger J, Hunt EH, Brand-Elnaggar J, Pearson RD. Rates of needle-stick injury caused by various devices in a university hospital. *N Engl J Med.* 1988;319:285-288.
- 4 EPINet™. Uniform needlestick and sharp object injury report, 48 hospitals, 2003.
- 5 Perry J, Robinson ES, Jagger J. Nursing 2004 needle-stick and sharps-safety survey: getting to the point about preventable injuries. *Nursing.* April 2004;34:43-47.
- 6 Kelen GD, Green GB, Purcell RH, et al. Hepatitis B and hepatitis C in emergency department patients. *N Engl J Med.* 1992;326:1399-1404.
- 7 Centers for Disease Control and Prevention, US Dept of Health and Human Services. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis. *MMWR.* 2001;50(RR11):1-42.
- 8 National Institutes of Health, US Dept of Health and Human Services. *Management of Hepatitis C.* Consensus Development Conference Statement, March 24-26, 1997.
- 9 Jagger J, De Carli G, Perry J, Puro V, Ippolito G. Chapter 31. Occupational exposure to bloodborne pathogens: epidemiology and prevention. In: Wenzel RP; *Prevention and Control of Nosocomial Infections.* 4th ed. Baltimore, Md: Lippincott, Williams & Wilkins; 2003.
- 10 Centers for Disease Control and Prevention, US Dept of Health and Human Services. Evaluation of safety devices for preventing percutaneous injuries among health-care workers during phlebotomy procedures – Minneapolis-St. Paul, New York City, and San Francisco, 1993-1995. *MMWR.* 1997;46:21-25.
- 11 EPINet™. Summary report for needlestick and sharp object exposure: category nurse–device: 6 needle, winged steel; Jan 01 2003 – Dec 31 2003.
- 12 EPINet™. Summary report for needlestick and sharp object exposure: category nurse–device: 6 needle, winged steel; Jan 01 2002 – Dec 31 2002.
- 13 Cohen, US House Committee on Education and the Workforce Subcommittee on Workforce Protections. "OSHA's compliance directive on bloodborne pathogens and the prevention of needlestick injuries." Supplement to the statement of Dr. Murray L. Cohen, June 22, 2000. Available at: <http://edworkforce.house.gov/hearings/106th/wp/needlestick62200/cohen.htm>. Accessed September 7, 2005.
- 14 Frost & Sullivan. *U.S. Safety Devices and Containers Markets* [market research report]. June 2003. Report #A455. Available for purchase at: <http://www.frost.com>. Accessed September 28, 2005.
- 15 The American Liver Foundation. ALF transplant fund program. Available at: <http://www.liverfoundation.org/db/articles/1029>. Accessed September 12, 2005.
- 16 Sandel Medical Industries, LLC. Safe handling of sharps: what you need to know about OSHA, JCAHO and CDC regulations and standards...and how to analyze the real cost of those injuries. Available at: <http://www.sandelmedical.com/sharps.pdf>. Accessed September 28, 2005.

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BD Customer Service: 1.888.237.2762
www.bd.com/vacutainer

U.S. Patent Nos. 4,900,307 and 4,747,831 and patent pending.
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