

TRU-CLOSE®

TCS Suction Drainage Bag

- UreSil's most widely recognized product is the TRU-CLOSE TCS Suction Drainage Bag.
- This product will attach to any luer locking drainage catheter and can remove fluids using active suction or gravity.
- Available in a variety of sizes and configurations, every TRU-CLOSE bag has two anti-reflux valves, provides active suction and is simple and intuitive to operate.
- TCS Bags are available in 300ml, 500ml and 1,000ml configurations.
- Product is CE-marked and available for sale in the USA and in countries where the product has received clearance for sale where applicable.

TCS500DS



TCS1000



TCS300D



Product Code	Description	Units/Box
TCS500	500 ml w/o Drainage Port	10
TCS1000	1000 ml w/o Drainage Port	10
TCS500D	500 ml with Drainage Port	10
TCS300D	300 ml with Drainage Port	10
TCS500DS	500 ml with Drainage Port Low profile bellows	10

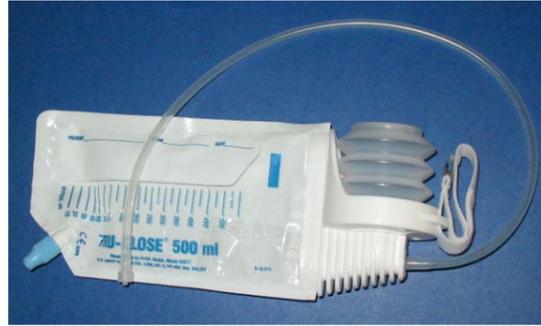
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TRU-CLOSE®

Suction Drainage System



TCS System Description:

Features/Benefits:

- The TRU-CLOSE Suction Drainage System is designed to be a completely closed system for abscess and other fluid drainage.
- Compact and self-contained system allows full patient ambulation.
- During activation, body fluids are not aerosolized because all fluids are contained in the system.
- Closed system design reduces the chances of cross-contamination.
- Dual anti-reflux valves prevent liquids and air from backing up into the catheter or wound drain.
- All TCS bags come with a standard luer lock connector to fit all luer-locking drainage catheters.
- In addition to the standard luer lock connector, the TCS300D and TCS500DS come with two straight connectors to be used with post surgical wound drains.
- If the bellows fills, flow to the bag continues via gravity drainage as long as the bag is below the level of the drainage site.
- Bag sizes: 300, 500 and 1,000 ml.
- Available with empty port in the 300 ml and 500 ml sizes.

Technical Specifications

Catalog Number	Bag Size	Approx. Vacuum	Drain Port?	Luer Lock Fitting?	Friction Fittings?
TCS300D	300 ml	4.5 PSI (233 mm Hg)	Yes	Yes	Yes
TCS500DS	500 ml	4.5 PSI (233 mm Hg)	Yes	Yes	Yes
TCS500D	500 ml	2 PSI (103 mm Hg)	Yes	Yes	No
TCS500	500 ml	2 PSI (103 mm Hg)	No	Yes	No
TCS1000	1,000 ml	2 PSI (103 mm Hg)	No	Yes	No

Patient and Nursing Information

1. To adjust the tubing length, remove the tube from the top of the housing or pull off the luer lock connector and cut the tube with a scissors to the desired length (see Figure 1).
2. To change the luer lock connector to a straight connector for use with a silicone wound drain, cut the tube or remove the adapter and insert the desired connector (see Figure 2).
3. Attach the bag to the drainage catheter or wound drain.
4. To ensure continuous flow, attach the bag to the patient gown or bedding below the level of the drainage site.
5. If the bag comes with an empty port, twist it closed (see Figure 3).
6. To activate the system, compress the bellows completely (see Figure 4). Do not try to pump the bellows; it will fill as it draws fluid from the drainage site. If the bellows is not re-activated after filling, the system will convert to gravity drainage thus preventing fluid backup.
7. To re-activate the system, compress the bellows. The fluid in the bellows will be discharged into the bag and the suction will be re-established (see Figure 4).
8. The bag is strong enough to withstand a build up of air pressure within the bag. The bag is equipped with hydrophobic filter vents, which will vent collected air. Air can be manually forced out of the bag by gently squeezing the bag while the system is positioned vertically (housing above bag).
9. Although the graduation marks on the bag are approximations only, approximate volumes collected can be recorded on the white "write-on" area on the bag. When recording these approximations, first empty bellows contents into the bag.

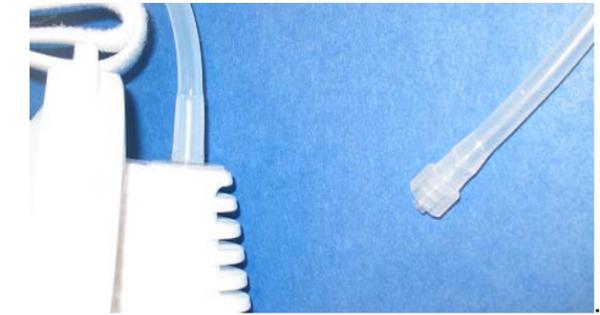


Figure 1

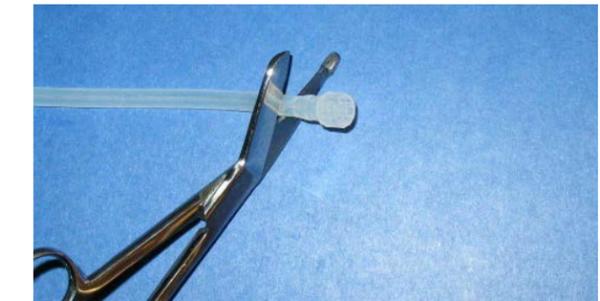


Figure 2



Figure 3



Figure 4

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