



## GORE® DrySeal Sheath Valve

Comprised of an outer silicone tube and an inner film tube. Saline is injected through the attached stopcock to pressurize the valve.

### Preparation

- Aspirate air from valve through white stopcock labeled “VALVE”
- Inject 2.5 ml saline, using supplied syringe, through the white stopcock labeled “VALVE” to pressurize the valve as shown in *Figure 3*
- Close the white stopcock and attach white cap (tethered to white stopcock)
- Caution: If saline leaks from valve or valve junctions, do not use sheath. Major blood loss may result.
- Flush dilator through luer port on the trailing end of the dilator
- Flush sheath through the blue stopcock labeled “FLUSH.” Close blue stopcock.
- Insert the dilator tip through the valve and into the sheath until the locking cap on the dilator is in contact with the mating surface of the valve
- Lock the dilator to the valve body by twisting the locking cap (clockwise) on the dilator until the pointer on the dilator cap aligns with the “lock” icon on the valve body. This ensures that the tapered portion of the dilator is beyond the leading end of the introducer sheath tip. This will optimize the flexibility of the leading end of the dilator and ensure that the dilator stays in place while advancing the introducer sheath with dilator into the patient’s access vessel.
- Coating activation: Wet the outer surface of the sheath with either sterile saline or water to activate the hydrophilic coating

**It is important to keep the sheath tube outer surface wet / slippery throughout the procedure. For procedures of extended duration, it may be necessary to reactivate the hydrophilic coating. This can be achieved through minor rotational or axial movement of the sheath to allow blood to reactivate coating.**

**Do not advance sharp objects / instruments through the valve. This could cause damage and result in blood loss.**

**In the event of valve failure (rupture of the inner film tube), clamping of the valve, twisting of the valve, or inserting the dilator will prevent blood loss. These actions are shown in *Figures 4–6*.**



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Consult Instructions for Use

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