Neonatal and Pediatric Securement From Salter

The touch that says so much

Now with options for nCPAP, high flow, and low flow therapy.
Collaborative Innovation

Today, Salter Labs is building a bold new future focusing on superior patient care, reliable outcomes, and innovative new products for neonatal, respiratory, and anesthesia.

We’re expanding our range of products, designed with the patient in mind, coupled with the clinician’s insight regarding real-world experience:

- High performance products for the OR and intensive care
- Fast and effective products for the floor and ED
- Comfortable products for patients to count on at home

We’re collaborating with you to innovate a new generation of products that make a difference and add value.

We’re putting the patient first, just like you do.
Salter is proud to offer Cannulaide® Securement Devices—created by a respiratory therapist—for your young and fragile patients who need a gentle touch.

Respiratory therapist Kate Beevers noticed that many NICU caregivers were spending more time piecing together products for use than they should be. It was taking time away from caring for the babies. She thought there must be a better way, and began to collaborate with other NICU clinicians.

Kate thought a better NICU securement product should be pre-cut, but able to fit all babies. It also had to be clear to allow for easy monitoring, which would help avoid additional strain on tender young skin.

And it had to be versatile to work with a variety of cannulas and minimize prong contact and any subsequent nasal breakdown.

The result was the CPAP Cannulaide® Securement Device and the High Flow Cannulaide® Securement Device, two truly unique products developed collaboratively out of clinical needs. That’s why they—and many other fine securement products—are now available from Salter.
The Cannulaide® Family of Securement Devices

For securement and protection

- Gentle materials provide a skin barrier between the baby and the cannula
- Nasal holes suspend cannula prongs within the nares, minimizing skin contact
- Hook and loop system secures the cannula to the patient but away from the septum
- Hook and loop system allows repositioning without removing the adhesive
- Two versions available:
  - For nCPAP therapy where a nasal seal is intended
  - For high-flow and low-flow therapy where a nasal leak is required
Protect the skin, enhance the seal

Gentle hydrocolloid material provides a unique protective barrier between the cannula and baby’s delicate skin, providing a consistent seal, and reducing the need to “upsize” prongs due to nasal leak.

- Nasal holes are designed to fit tightly around cannula prongs
- Soft, low-profile hook and loop strips provide for easy securement and repositioning of the nasal interface
- Hook and loop system prevents the cannula from disconnecting from patient movement
- Works well in humid conditions, even after 24 hours of continuous use

Consistent performance

Precision manufacturing now makes it possible to get the consistent hole size needed for a consistent CPAP seal.

Nasal holes are designed to fit tightly around cannula prongs, enhancing the seal from the first breath.
Enhancing the seal

Pre-cut and available to fit different patient weights and cannula prong sizes.

Less pressure on tender young skin

The size of babies’ nares varies over time and as babies age, so the limited, fixed sizes of cannula prongs will often not fit. When prongs don’t fit, using a larger size or pushing into the nose is required for a seal. Measuring the force required to create CPAP pressure shows this clearly.

The CPAP Cannulaide® Securement Device enhances a seal without having to press into the baby’s nares, with just 1 oz of force on average¹.

CPAP Cannulaide® Securement Device is not for use with low or high flow oxygen cannulas, nCPAP masks, or endotracheal tubes.
Protect the skin, keep the leak

Positions and secures a nasal cannula during high flow oxygen therapy when there are no contraindications. Gentle to a baby’s tender skin.

- Integral hook and loop strips provide for easy securement and repositioning of the nasal interface
- Hook and loop system prevents the cannula from disconnecting when pulled

- Helps secure the cannula near the nares to maintain therapy during patient movement
- Hook and loop system maintains a space between the cannula and the septum
- Minimizes contact between skin and cannula
- Reduces friction caused by back-and-forth motion of the cannula
- 2 sizes with consistently larger prongs to adapt to different patient weights

Not for use to create a CPAP seal.
Soft, sensitive, and secure

One system combines both securement and protection. Designed for your tiniest patients who need high flow oxygen therapy.

The benefits are clear

- Soft silicone material helps decrease skin irritation
- Clear look is less intimidating to loved ones and allows for easy repositioning and skin monitoring
- Larger nasal holes to create a gap around cannula prongs

Not for use with CPAP interfaces.
A family of gentle securement products for different patient needs

Cannula and Tubing Securement, especially when repositioning is important

**Mini-Whiskers™**

Premature to neonate patients
- A gentle securement system for nasal cannulas and feeding tubes
- Hydrocolloid material designed to provide gentle adhesion for 24 to 36 hours
- Soft, low-profile hook and loop strips help keep tubing in position, reduce skin friction, and allow for easy repositioning of the cannula
- Ideal for premature babies under 2000 g

**Sticky Whiskers™**

Neonate to pediatric patients
- A gentle securement system for nasal cannulas and feeding tubes
- Hydrocolloid material designed to provide gentle adhesion for 24 to 36 hours
- Hook and loop strips help keep tubing in position, reduce skin friction, and allow for easy repositioning of the cannula

**Tender Grips**

Pediatric to adult patients
- Soft, skin-toned acrylic material designed to hold cannula tubing in position, generally used around the patient’s cheeks
- Internal flap allows cannula adjustment without removing the securement from the patient’s skin
A family of gentle securement products for different patient needs

**General Purpose Securement**

**Hydrocolloid Strips**
*All patients*
- Hydrocolloid material that provides gentle adhesion to the skin for 24 to 36 hours
- Pre-cut and ready to apply

**Silicone Strips**
*All patients, especially premature*
- A delicate silicone material that resists moisture and can be easily repositioned
- Cleanly detaches from the skin without causing skin irritations

**Grippies**
*Securing tubing to other devices*
- A non-adhesive hook and loop tape
- For organizing cords and tubing around a patient
As you know, the skin of newborns is at risk for disruption of normal barrier function and trauma. Preventive care recommendations should include reducing trauma, protecting immature barrier function, and promoting skin integrity.²

When adhesives are applied and removed they can cause disruption to skin surfaces.² Several guidelines, including The AWHONN/NANN Neonatal Skin Care Project, recommend the use of hydrocolloid and silicone adhesive products whenever possible³-⁵:

- In premature infants, a hydrocolloid base layer (next to the skin) should be used first before securing tubes⁴
- Silicone is a good choice for securement of lightweight tubing on at-risk skin or where frequent retaping is required³

All Salter hydrocolloid and silicone products meet these guidelines
## Guidance for appropriate use

<table>
<thead>
<tr>
<th>Modality</th>
<th>CPAP Therapy</th>
<th>High Flow Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Seal vs leak</strong></td>
<td>When a nasal <strong>seal</strong> is intended</td>
<td>When a nasal <strong>leak</strong> is required</td>
</tr>
<tr>
<td><strong>Box design</strong></td>
<td>White boxes with colored sizing stripes</td>
<td>Salter green boxes with colored sizing stripes</td>
</tr>
<tr>
<td><strong>Indication</strong></td>
<td>To aid in securing and positioning the nasal interface for neonates and infants undergoing noninvasive ventilation in an acute care setting.</td>
<td>For use in the hospital or home as a skin barrier, and to help secure and position the nasal cannula in neonates, infants and pediatric patients on low or high flow oxygen therapy.</td>
</tr>
</tbody>
</table>
| **Usage instructions**    | - Disposable, single-patient use  
- Before application, clean skin with sterile water and dry completely  
- Inspect for proper placement and skin integrity every 2 hours  
- Routinely inspect the insides of the nares and provide gentle suction as needed to remove moisture and secretions  
- Replace at least once every 24 hours or more frequently as needed | - Replace if device comes loose  
- Frequently inspect skin integrity |
| **Warnings**              | - Do not use with low or high flow oxygen nasal cannulas  
- Do not use with nasal CPAP masks  
- Do not use to secure endotracheal tubes  
- Excess condensation in the CPAP circuit and interface may interfere with the CPAP Cannulaide® adhesion properties  
- Follow your facility’s procedure for managing circuit condensation | - Do not use if known sensitivity to silicone  
- If skin irritation is noted, discontinue use |
| **Cautions**              | - Do not use if known sensitivity to hydrocolloids  
- If skin irritation or necrosis is noted, discontinue use or do not initiate use of the CPAP Cannulaide® device  
- If systemic or local infection develops under the CPAP Cannulaide® device, discontinue use and initiate appropriate adjunctive therapy  
- Remove CPAP Cannulaide® if CPAP is discontinued or if nasal prongs are removed |
Salter is your source for soft, safe, and sensible securement

Ordering information

<table>
<thead>
<tr>
<th>PART NO.</th>
<th>UNITS</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA100-0-25</td>
<td>Box of 25</td>
<td>CPAP Cannulaide® Securement Device, size 0, for infants &lt;700 g</td>
</tr>
<tr>
<td>CA101-0-25</td>
<td>Box of 25</td>
<td>CPAP Cannulaide® Securement Device, size 1, for infants 700-1250 g</td>
</tr>
<tr>
<td>CA102-0-25</td>
<td>Box of 25</td>
<td>CPAP Cannulaide® Securement Device, size 2, for infants 1251-2000 g</td>
</tr>
<tr>
<td>CA103-0-25</td>
<td>Box of 25</td>
<td>CPAP Cannulaide® Securement Device, size 3, for infants 2001-3000 g</td>
</tr>
<tr>
<td>CA104-0-25</td>
<td>Box of 25</td>
<td>CPAP Cannulaide® Securement Device, size 4, for infants &gt;3000 g</td>
</tr>
<tr>
<td>CA110-0-1</td>
<td>Box of 25</td>
<td>CPAP Cannulaide® Securement Device, Variety Pack, 3 qty, size 0; 7 qty, size 1; 10 qty, size 2; 3 qty, size 3; 2 qty, size 4</td>
</tr>
<tr>
<td>HF-101-0-25</td>
<td>Box of 25</td>
<td>High Flow Cannulaide® Securement Device, clear silicone cannula securement system for infants &lt;1250 g (0.84” x 3.00”)</td>
</tr>
<tr>
<td>HF-102-0-25</td>
<td>Box of 25</td>
<td>High Flow Cannulaide® Securement Device, clear silicone cannula securement system for infants &gt;1250 g (1.00” x 3.50”)</td>
</tr>
<tr>
<td>MW100-0-120</td>
<td>20 pouches per box</td>
<td>Mini-Whiskers™ exclusively for early-premature infants (&lt;2000 g) 6 - 0.5” x 1.4” per pouch, including 12 securement loops</td>
</tr>
<tr>
<td>SW102-0-25</td>
<td>Box of 25</td>
<td>Sticky Whiskers™ one size fits all for infants (&gt;2000 g) 1 - 0.436” x 3.5” per pouch, including 2 securement loops</td>
</tr>
<tr>
<td>SS100P-0-80</td>
<td>10 sheets per box</td>
<td>All-purpose, moisture resistant Silicone Strips (8 per sheet, 5.25” x 6.00”)</td>
</tr>
<tr>
<td>SS100C-0-1600</td>
<td>20 boxes per case</td>
<td>All-purpose, moisture resistant Silicone Strips (8 per sheet, 5.25” x 6.00”), with 10 sheets per box</td>
</tr>
<tr>
<td>GR101P-0-5</td>
<td>5 rolls</td>
<td>Grippies non-toxic hook and loop fastener strip (9’’ roll x 0.50” wide)</td>
</tr>
<tr>
<td>GR101C-0-150</td>
<td>150 rolls</td>
<td>Grippies non-toxic hook and loop fastener strip (9’’ roll x 0.50” wide)</td>
</tr>
<tr>
<td>1005-0-25</td>
<td>25 pairs</td>
<td>Tender Grips skin fixation system</td>
</tr>
<tr>
<td>1217-0-25</td>
<td>25 sheets</td>
<td>Hydrocolloid strips 2 clear securement strips per sheet</td>
</tr>
</tbody>
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References: