

⚠ Caution | Don't mark on the model and other components with pen or leave printed materials contacted on their surface.
Ink marks on the models will be irremovable.

MW8A

Tube Feeding Simulator PLUS



Instruction Manual

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Movie Site

 **KYOTO KAGAKU co.,LTD**



English Site

<https://youtu.be/fZQTYyixtNE>

Introduction

Manufacturer's note

This Tube Feeding Simulator (MW8) is a task trainer for Tube Feeding (Intranasal, Oral and PEG) skills in medical and nursing settings.

This simulator is designed for training in medical and nursing education.

Read the instruction carefully before use.

Any other use, or any use not in accordance with the enclosed instructions, is strictly discouraged. The manufacturer cannot be held responsible for any accident or damage resulting from such use. Should you have any questions on this simulator, please feel free to contact our distributor in your area or KYOTOKAGAKU at any time. (Our contact address is on the back cover of this manual)

● Features

- Training of catheter insertion and administration of nutrients in Fowler's position.
- Confirming the placement of the feeding tube or PEG tube by auscultating epigastrium and aspirating stomach fluid (water).
- Transparent body allows to see anatomically correct internal structure and if the catheter advances in the right route.
- Actual nutrition solution can be used for training.
- Includes tracheostomy care training for patients with an indwelling tracheostomy tube.

DOs and DON'Ts

DOs

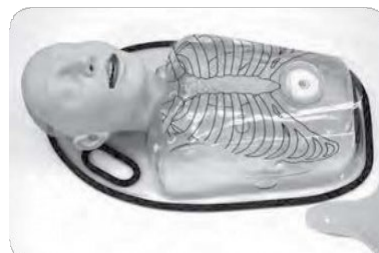
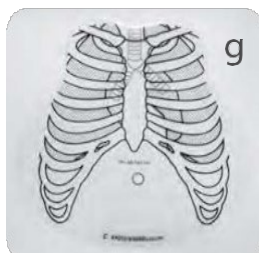
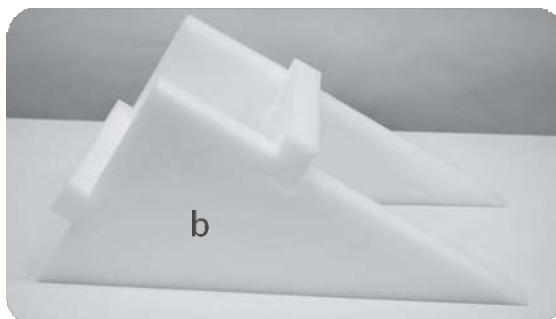
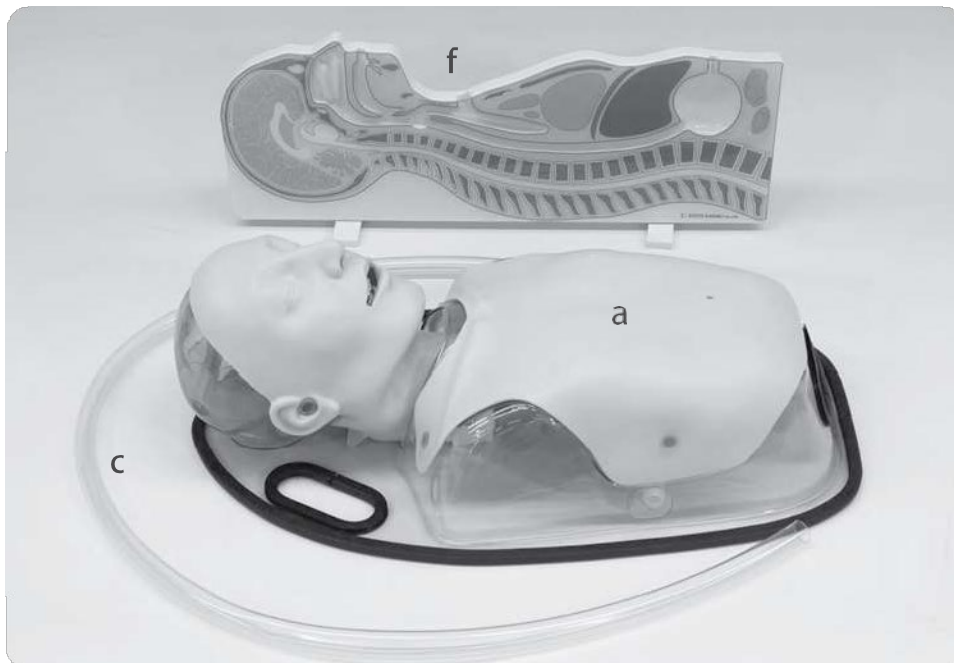
- Handle the manikin and the components with care.
- Talcum powder may be used on the manikin after use to preserve suppleness of the skin and prevent it from being stained.
- Storage in a dark, cool space will help prevent the skin colors from fading.
- The manikin skin may be cleaned with a wet cloth, if necessary, using mildly soapy water or diluted detergent.

DON'Ts

- Do not let ink from pens, newspapers, this manual or other sources come in contact with the manikin, as they cannot be cleaned off the manikin skin.
 - Never use ethanol or organic solvent like paint thinner to clean the skin, as this will damage the simulator.

Set Includes

Before your first use, ensure that you have all components listed below.

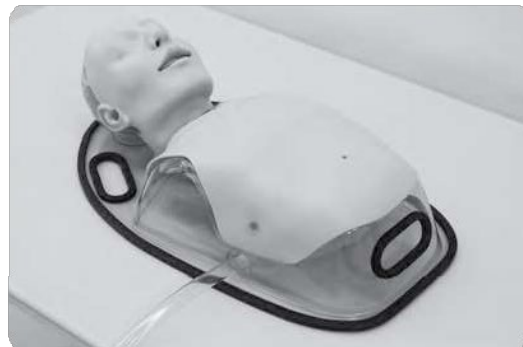
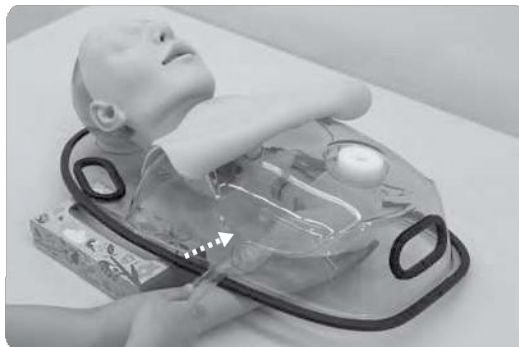
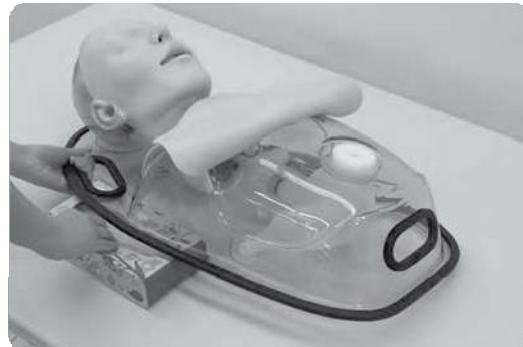


a. Male Torso	1 piece	f. Tube Feeding routes model	1 piece
b. Support Base	1 piece	g. Tube Feeding chest sheet	1 piece
c. Drain Hose	1 piece	h. Plug for drain port	1 piece
d. Funnel	1 piece	Silicone-based lubricant	1 piece
e. Plastic cup	1 piece		

1 Training on the bed

1. Connect the drain hose to stomach parts of the torso model.

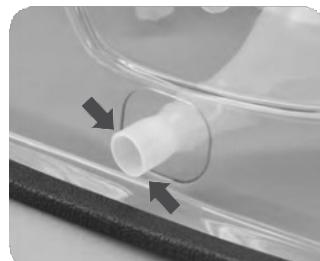
- 1) Remove the skin from the body in order to see the stomach parts inside.
- 2) Hold the right side of the torso and put something (e.g. tissue box) between the left edge of the frame and the table.
- 3) Connect the drain hose to stomach parts steadily.



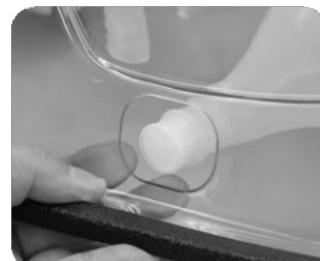
In case training requires to keep the level of water in the stomach and does not require feeding liquid formula to the simulator, such as use of a bumper type PEG tube or training of confirmation of NG tube placement, close the drain port with the included plug instead of connecting the drain tube.



Insert the plug firmly into the drain port of the stomach.



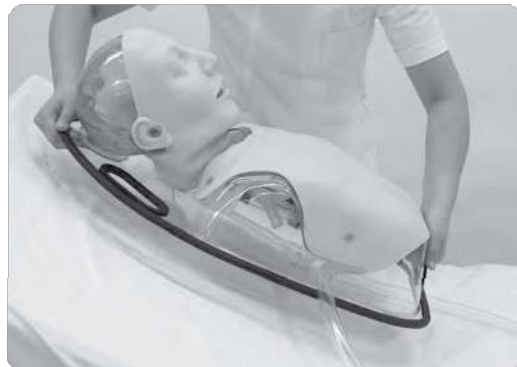
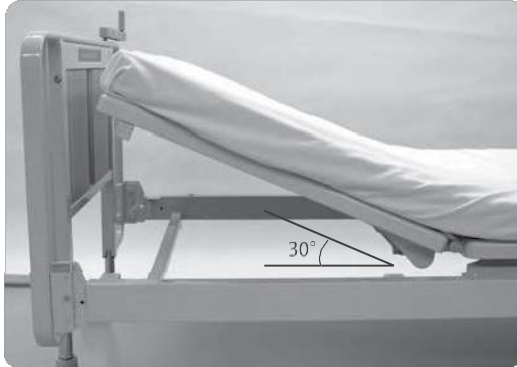
Turn up the rim of the plug.



Ready for training.

1 Training on the bed

2. Set the torso model on the bed reclined 30 degree.



3. Put the end of the drain hose into the bucket.



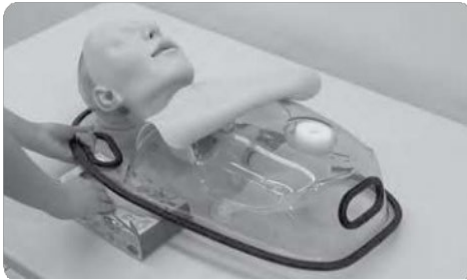
4. Fill the water in the stomach. Insert the funnel into PEG hole and fill about 300cc water. Attach the skin on the model.



2 Training on the table

1. Connect the drain hose to stomach parts of the torso model.

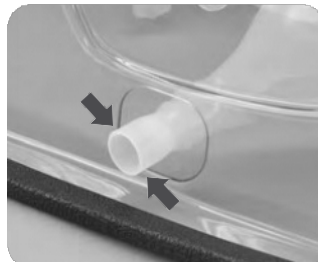
- 1) Remove the skin from the body in order to see the stomach parts inside.
- 2) Hold the right side of the torso model and put something (e.g. tissue box) between the left edge of the frame and the table.
- 3) Connect the drain hose to stomach parts steadily.



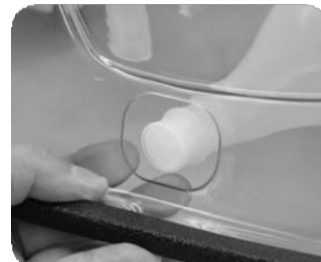
In case training requires to keep the level of water in the stomach and does not require feeding liquid formula to the simulator, such as use of a bumper type PEG tube or training of confirmation of NG tube placement, close the drain port with the included plug instead of connecting the drain tube.



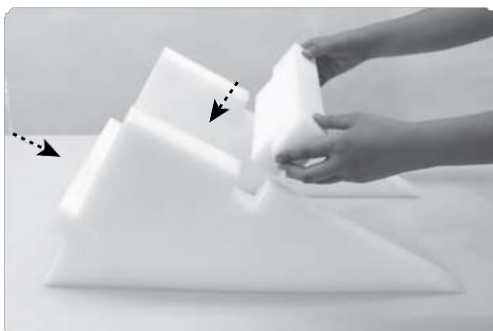
Insert the plug firmly into the drain port of the stomach.



Turn up the rim of the plug. Ready for training.



2. Assemble the support base.



3. Set the model on the support base.



2 Training on the table

4. Put the end of the drain hose into the bucket.

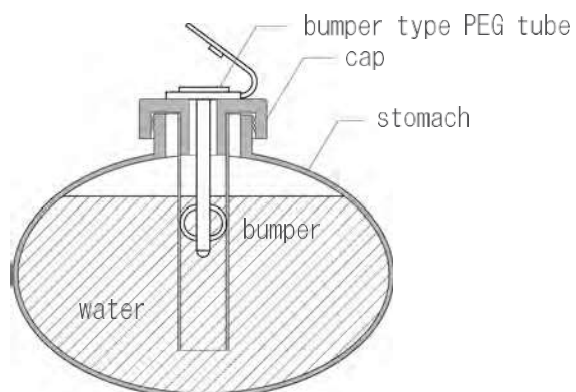


5. Fill the water in the stomach.

- 1) Insert the funnel into PEG hole and fill about 300cc water.
- 2) Attach the skin on the model.



When using a bumper type PEG tube and seeking to confirm its placement, use the plug for the drain port of the stomach and fill the stomach with water till the bumper is submerged.



1 Intranasal tube feeding

1. Inserting catheter

Spray silicone-based lubricant onto the catheter and into the nasal cavity.
Shortage of lubricant will cause difficulties in inserting the catheter. Do not use gel lubricants or other types because they will dry and remain in the simulator.



.....
We recommend 14 Fr catheters for this simulator. Larger catheters will result in unsuccessful insertion.
In this simulator, catheter will reach the stomach after 50cm insertion.

2. Training the fixation of the catheter with tape



.....
Do not leave the tape on the skin of the simulator. If the tape is left adhered for a prolonged period of time, the skin surface will remain sticky from adhesive of the tape.

If you fix the catheter with tape, do not start to inject the nutrient solution immediately as the tape is still easy to come loose. Wait for a few minutes until the tape will be tightly fixed.

2 PEG procedure

1. Fixing PEG catheter

Fix the balloon catheter for PEG with about 5ml air. Do not use water or any liquid.

(* 5 ml is the guide value for the recommended balloon catheter for PEG "NIPRO 20Fr PEG button catheter". For other catheters, fill the amount of air which is sufficient to anchor the catheter to the PEG hole.)



3 After injecting the nutrient solution

1. After injecting the nutrient solution

In case of intranasal tube feeding and PEG procedure, drain the content from the stomach for each injection of a package of nutrient solution.

- 1) Move the torso to the edge of the bed.
- 2) Hold the torso with both hands and tip it to drain the content.
- 3) Remove the skin and pull out the PEG catheter.
- 4) Refill the stomach with 300cc water for the next training.

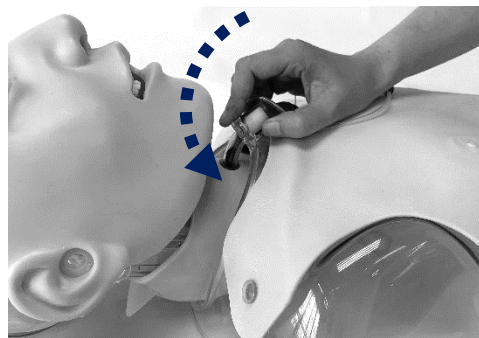


4 Tracheostomy Care Training

1. Attaching a Tracheostomy Tube

Lubricate both the tracheostomy tube and the manikin's tracheostomy opening thoroughly using the included lubricant. Insufficient lubrication may make insertion difficult. Be sure to use the included lubricant. Other lubricants, such as gel-type lubricants, may leave dried residue inside the product.

Insert the tracheostomy tube slowly, following its natural curve. Then secure the tube by inflating the cuff.

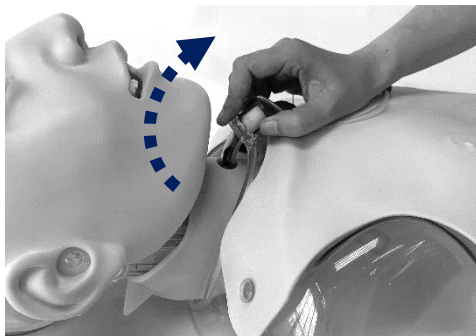


Caution

A tracheostomy tube with an outer diameter of 11 mm (OD 11 mm) is recommended. Using a tube with a larger outer diameter may not only make insertion difficult but also damage the product.

Caution

The product's structure does not allow the cuff to be fully inflated. Inflate the cuff only as much as necessary to secure the tube.



2. Removal of the Tracheostomy Tube

First, deflate the cuff. Slowly remove the tracheostomy tube, following its natural curve. If the tube is difficult to remove, apply the included lubricant between the tube and the tracheostomy opening before attempting removal again.

Caution

Always be sure to fully deflate the cuff before removing the tracheostomy tube. Removing the tube with the cuff still inflated may damage the product.

1 Drain the content from the stomach

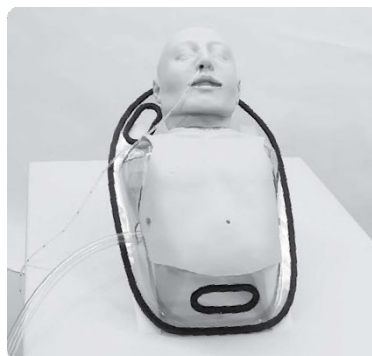
Drain the content from the stomach after the training.

- 1) Move the torso to the edge of the bed or table.
- 2) Hold the torso with both hands and tip it to drain the content.

(Training on the bed)

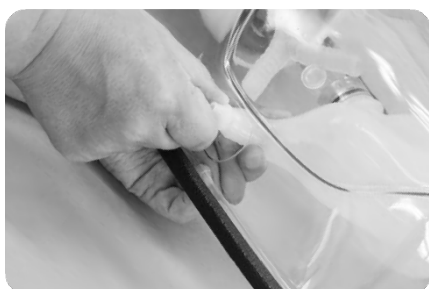


(Training on the table)



After training that uses the plug for drain port

Lift the side of drain port and pull and remove the plug upwards, while taking care not to spill water. Then tilt the torso above a container to discard the water from the stomach. Be careful that the discarded water won't flow out of the caching container through the edge guard of the plastic frame.



Be careful not to slip or drop the torso when lifting and tilting it. Use its two handling holes.

2 Cleaning the catheter

Before pulling out the catheter, clean the catheter and tube.

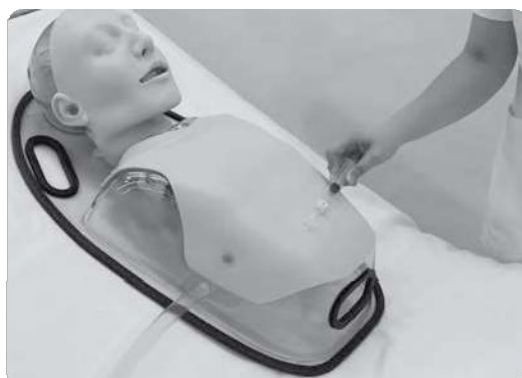
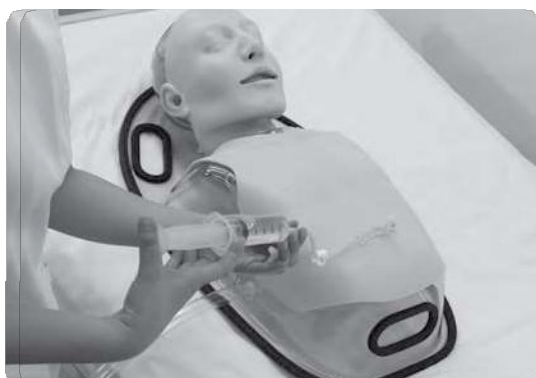
(NG tube)

Inject mildly hot water to the NG tube with a syringe and clean the inside of the catheter. Then, pull out the NG tube from the torso.



(PEG catheter)

Inject the mildly hot water to the PEG catheter with a syringe to clean the inside of the tube and catheter. Then, pull out the PEG catheter or tube from the torso.

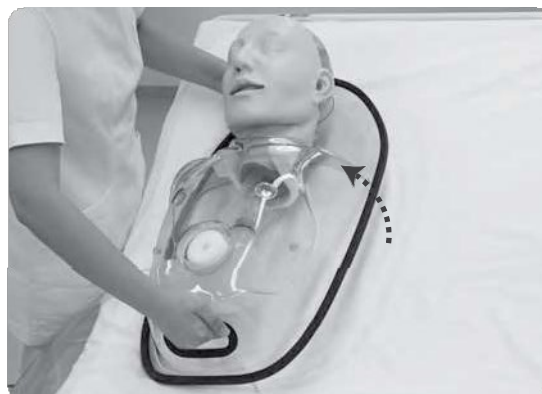
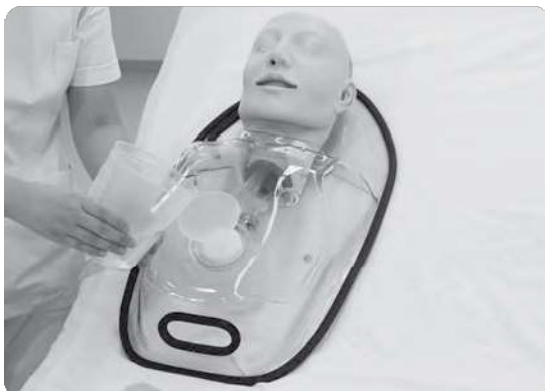


.....
In case of a fixed PEG catheter, insert the syringe to the catheter valve and remove the air. Then pull out the PEG catheter carefully from the torso.

3 Cleaning the stomach and remove the drain hose

After the catheters are removed, clean the stomach with mildly hot water. Repeat cleaning the stomach until the water doesn't include nutrient solution anymore. Then, remove the hose from the stomach part.

(Training on the bed)



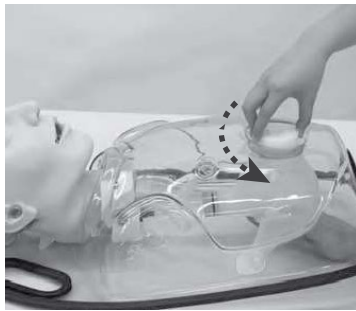
(Training on the table)



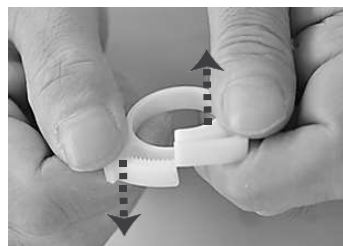
✖ Removing the stomach part is easier on the table than on the bed.

4 Dismantling the parts

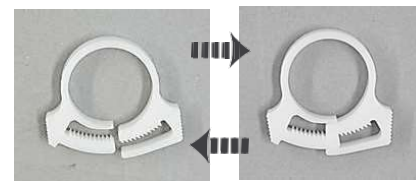
1. Dismantle the stomach by twisting the PEG part counterclockwise.



2. After removing the stomach, unlock the clip to remove the esophagus. Clip can be unlocked by sliding off the interlocking parts with teeth vertically. Hold the cervical part from under the model and pull the esophagus from cervical part.



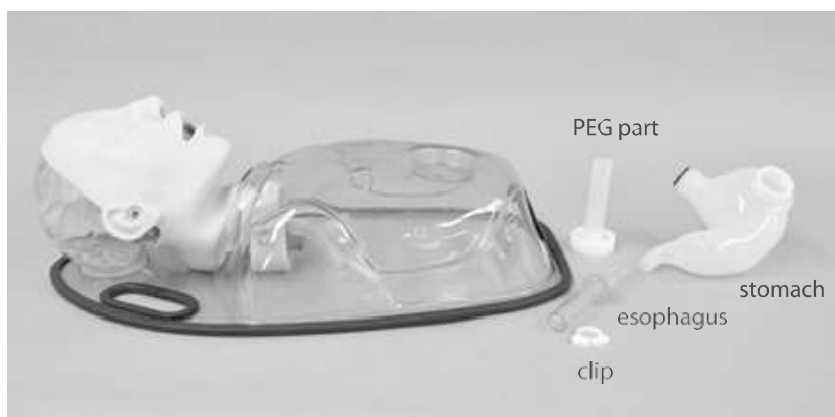
Unlock the clip.



Unlocked

Locked

3. Remove the esophagus from the stomach.

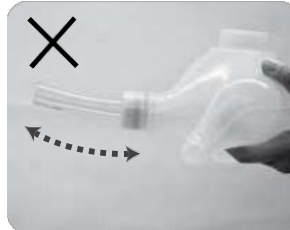
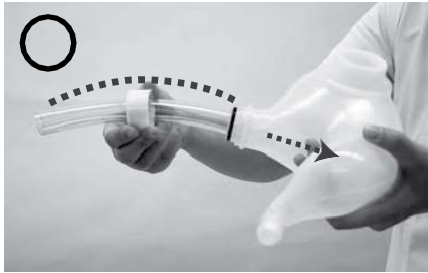


Cleaning

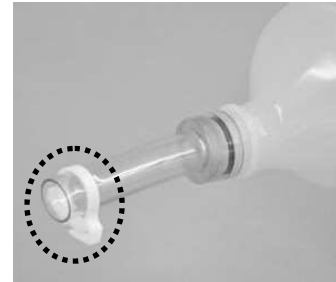
Wash and dry the stomach and all other parts. Clean the stomach part with sodium hypochlorite if necessary. (Follow the instruction of the antiseptic for how to use it)

5 Setting the parts

1. Hold the esophagus tube so that its convex curve some upwards and its tip faces down. Insert the tube firmly into the cardia hole of the stomach. Then put the clip near the tip of the tube . Keep the clip unlocked.



Incorrect orientation



2. Insert the esophagus into the cervical part steadily. When inserting, be sure to hold the cervical part by one hand and push the tube toward the cervical part with another hand. Lock the clip to fix the connection. To lock the clip push the teethed parts from both side till they click.

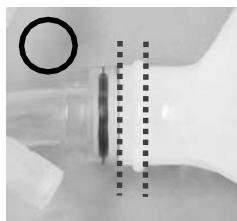


Lock the clip

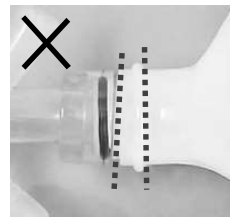


Lock the clip

3. Verify that the angle of connection between the esophagus and the stomach is correct.

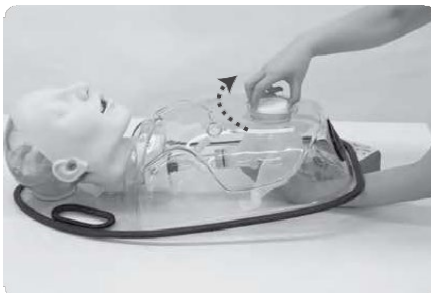


Correct angle



Wrong angle

4. Then attach the PEG part to the stomach by twisting clockwise. Put the skin on the model.



Quick check-up before calling the customer service. Use the table if you have problems using the simulator. Look in this section for a description of the problem to find a possible solution.

FAQ s

Q. Cannot insert the catheter.

A1. Catheter size may be larger than the recommend size.

Use 14Fr catheter for NG and Oral, 20Fr for PEG.

A2. Lubricant may not be sprayed on catheter and nasal passage.

Spray the lubricant (Silicone-based lubricant) to catheter and nasal passage.

Q. Cannot insert the tracheostomy tube.

A1. The tube may be larger than the recommended size.

Use a tracheostomy tube with an outer diameter of 11 mm (OD 11 mm).

A2. There may be insufficient lubricant.

Apply the included lubricant to both the tracheostomy tube and the tracheostomy opening.

Q. Cannot hear the bubble sound in the stomach.

A1. There may be no water in the stomach.

Fill 300cc water in the stomach.

A2. Balloon catheter is not fixed at PEG hole.

Fix the PEG catheter by adding air into the balloon.

A3. The esophagus part is not fixed in the correct angle.

Confirm the esophagus attachment (page 14).

Q. Cannot aspirate stomach fluid.

A1. NG tube/Balloon type PEG:

There may be no water in the stomach.

Fill 300cc water in the stomach.

A2. Bumper type PEG:

Level of water in the stomach is low.

Add water until the bumper is fully submerged.

Q. Aspirated stomach fluid is muddy.

A1. There may be no water in the stomach.

Drain the content from the stomach after each injection of a package of nutrient solution. Then fill 300cc water.

Q. Cannot remove the pollution of the stomach and drain tube.

A1. The nutrient solution was not removed during the last cleaning and is polluted by bacteria. Replace the stomach and/or drain hose with new ones.



Caution

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- For inquiries and service, please contact your distributor or KYOTO KAGAKU CO., LTD.



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