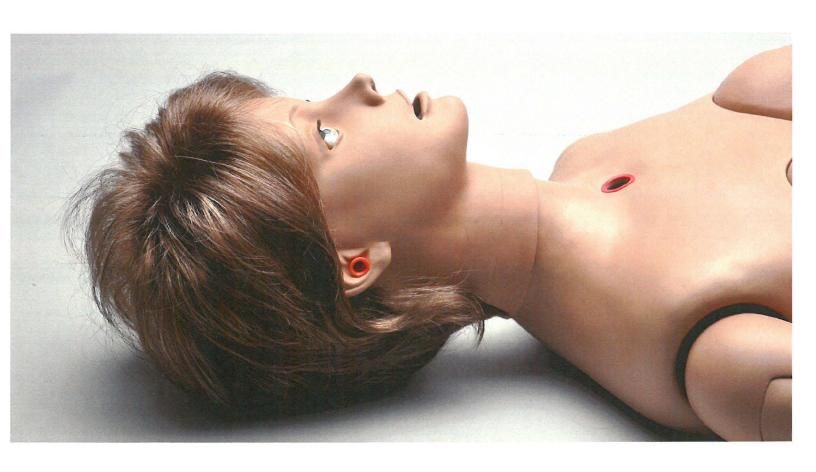
Clinical Chloe[™] Original Patient Simulator

R17625



Clinical Chloe $^{\text{TM}}$ is an interactive educational system developed to assist a certified instructor. It is not a substitute for a comprehensive understanding of the subject matter and not intended for clinical decision making.

User Guide 12.12.1

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Care and Cautions

Overall Warnings

Remember that damage caused by misuse is not covered by your warranty. It is critical to understand and comply with the following quidelines:

GENERAL

- This simulator is constructed of material that approximates skin texture. Therefore, in handling the model, use the same gentle techniques as you would in working with a patient.
- Ball point pens, ink and markers permanently stain the skin.
- Do not wrap this or any other Gaumard product in newsprint.
- Do not use alcohol, acetone, Betadine® or any other antiseptic which contains iodine in this or any Gaumard® simulator. These products could damage or stain the skin of the simulator.
- Replacement parts are available from Gaumard Scientific or your Distributor.

OPERATING CONDITIONS

Operating the simulator outside these ranges may affect performance:

- Operating temperature: 50°-95° F (10°-35° C).
- · Humidity: 5%-95% (non-condensing).

STORAGE CONDITIONS

- Improper storage may damage the simulator.
- Keep it stored in the box and/or bag provided.
- Do not stack or store heavy materials on top of the carton.
- Storage temperature: 32°- 113° F (0°- 45° C).
- · Humidity: 40%-60% (non-condensing).

CLEANING

- Clean the skin of the simulator after every training session. The skin should be cleaned with a cloth dampened with diluted liquid dish washing soap and dry thoroughly.
- · Remove all traces of any lubricant.
- Do not clean with harsh abrasives.
- · Do not use povidone iodine on the simulator.
- The simulator is "splash-proof" but not waterproof. Do not submerge or allow water to enter the interior of the simulator.

Stoma Guidelines, Warnings, and Maintenance

USER GUIDELINES

· Always handle the stomas with clean hands.

WARNINGS

- Do not palpate using fingernails.
- Do not clean with alcohol or aggressive solvents.
- Do not pack any sharp objects with the stomas.
- Do not press the stomas against soiled surfaces, ink, or newsprint. The stoma material is absorbent.

MAINTENANCE

- Prevent items from resting or pressing against the stomas as indentations will form on the pressure points. The stomas may return to the normal shape after the pressure is relieved.
- Place talcum powder on the stoma surface to reduce tackiness. This can be reapplied as needed.
- Clean the stomas using a mild solution of soap and water.
- Apply talcum powder to return the surface to a skin-like feel and appearance.

Equipment Set Up

Overview

The simulator is shipped partially assembled. Perform the following steps as part of the first installation procedure.

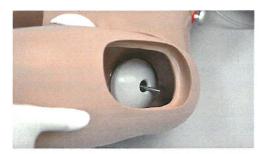
LEG ASSEMBLY

- 1. Place the simulator on a flat surface.
- 2. Remove the wing nuts, washers and springs from the bolts on the hips.



3. Remove the IM pad from each leg and slide the bolt through the orifice in the leg.





4. Reach through the IM site and assemble the fasteners onto the hip bolt in this order: washer, spring, second washer, and wing



5. Tighten the wing nut until the spring is compressed slightly.

Working with Clinical Chloe™

Simulator Features

Disclaimer: The section below describes all possible features in the Clinical Chloe™ simulator. Please use the list below to identify which features are standard in your model. The content of this information is subject to change without prior notice. Please contact Gaumard® Scientific for the most current information.

Clinical Chloe is an advanced multipurpose simulator equipped with the following features:

- · Enema administration
- · Injection site in deltoids, quadriceps, and left
- Interchangeable male and female breasts; left female breast has malignancy
- · Male and female genitalia to perform catheterization
- · Medium skin tone is the standard simulator color; light or dark skin is available at no extra cost
- · Ostomy set
- · Surgical site for tracheotomy
- Trachea, bronchi, and lungs to assess airway
- · Vaginal douching and pap smear exercises with realistic vagina and cervix

Airway

TRACHEOSTOMY CARE

The simulator is supplied with a tracheostomy

Systemic

TEETH AND TONGUE

The simulator is supplied with normal size teeth and tongue. The upper and lower dentures are removable.

TEETH ASSEMBLY/DISASSEMBLY INSTRUCTIONS

The dentures are attached with Velcro, and no force is required for their removal.

- To remove the teeth, gently insert one finger into the upper or lower jaw and tap lightly. Dentures will immediately snap out.
- 2. To reinsert, gently hold lower or upper lip and replace dentures.

EARS, NOSE AND THROAT

WARNING

Always use lubricant prior to the introduction of a Levin tube or any other invasive device.

Left ear: the interior of the ear contains a simulated ear canal with a capacity of 10 ml to practice syringing exercises.

Nasal/oral openings: both are connected to the stomach reservoir/tank. Use a #10 Levin tube to demonstrate tube feeding and gastric suction.

A gastric reservoir (capacity: 850 ml) is provided with an opening for gastrostomy.

RANGE OF SIMULATED MOVEMENT

The joints are strong and their movements are lifelike and realistic.

MALE AND FEMALE ORGANS

The simulator includes a fitted female genitalia and a male organ attachment. The male organ attachment is a reproduction of a male external genitalia with scrotum.

ASSEMBLY INSTRUCTIONS

1. To attach the male organ, remove the red adaptor connected to the urethra passage and set it aside.



Do not throw the red adaptor away, as it is necessary to perform female catheterization exercises.

2. Gently slide the tube from the male organ into the opening of the urethra and attach the Velcro.



INJECTION SITES

Administer intramuscular and subcutaneous injections on the deltoids, quadriceps, and left upper gluteal region. All injection pads are easily removed and replaced.



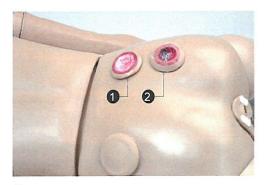


BREAST PALPATION AND EXAMINATION

The simulator is provided with two sets of interchangeable male and female breast inserts. The left female breast contains a simulated tumor. The right female breast is normal.

DECUBITUS ULCERS (OPTIONAL)

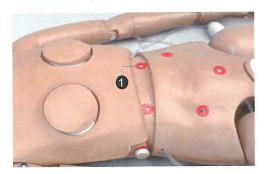
The simulator is supplied with two anatomically accurate ulcers.



- 1 Initial stage of ulceration
- Suppuration or pus/deeply infected stage.

STOMACH AND LIVER (MODEL S221)

The upper torso contains a realistic stomach and liver. A gastrostomy port, located near the waist, connects directly to the stomach tank.

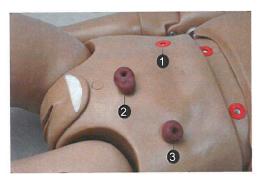


① Gastrostomy port

TRANSVERSE COLOSTOMY, ILEOSTOMY, AND SUPRAPUBIC CYSTOSTOMY (MODEL S221)

The simulator has anatomically sculptured stomas of a transverse colostomy, ileostomy, and suprapubic cystostomy.

Practice skin preparation, stoma hygiene, treat conditions around the site, and apply disposable or permanent ostomy bags to the openings.



- 1 Ileostomy
- 2 Suprapubic cystostomy
- 3 Transverse colostomy

INTERNAL RESERVOIRS MAXIMUM CAPACITY

Tank	Total Capacity
Stomach	750 ml
Bladder (Suprapubic Stoma)	1800 ml
Rectum (Colostomy)	1800 ml
Ileostomy	650 ml
Ear Canal	10 ml

Hospital Care Capabilities

WARNING

Always use a lubricant when introducing an invasive device.

BANDAGING

The fingers and toes of the simulator are separated to permit bandaging exercises. The surface of the simulator is smooth and resistant to water, oil, and liniments.

EYES/OPHTHALMOLOGIC EXERCISES

The head has eyes that open and close permitting the following exercises:

- · Administration of orbital medicines into the conjunctival sac
- · Removal of foreign bodies
- · Eye irrigation

HYGIENIC CARE

The head of the simulator is supplied with a wig, permitting instruction in combing, shampooing, and head draping.

ENEMA ADMINISTRATION

The legs articulate to permit enema exercises with the simulator on its back. The enema should be introduced with an anal nozzle of small diameter. The enema reservoir capacity is approximately 750 ml.

URINARY CATHETERIZATION

Chloe has a simulated bladder and female genitalia to practice catheterization procedures.

Use the suprapubic opening to fill the bladder and an 18 Fr catheter to withdraw fluids.

FILLING THE BLADDER

To fill the bladder, insert a funnel or a large syringe at the suprapubic opening, and instill 500 ml of water.



EMPTYING THE RESERVOIR SYSTEM

To remove fluid from the bladder reservoir, sit the simulator over a bedpan with the catheter in place; alternatively, remove the waist rod separating the upper torso from the lower torso, and press out the fluid from the bladder reservoir.

SIMULATING BLADDER CONTRACTION

Catheterization exercises may be carried with the aid of an auxiliary tank on a stand.

- 1. Fill the auxiliary tank with fluid and place on provided stand.
- 2. Remove stoma from suprapubic opening, if connected.
- 3. Connect the auxiliary tank to the suprapubic opening using the red connector.

The gravity feed of the fluid simulates the contraction of the bladder and adds realism to the procedure.

INCREASING URINARY FLOW

Use the squeeze bulb located on the right side of the lower torso to inflate an internal cushion lifting the bladder anteriorly. This will increase bladder pressure and consequently intensify the urinary flow.

Remove the ostomy from the suprapubic stoma and attach the rubber plug to seal the bladder reservoir.



FEMALE CATHETERIZATION

- Catheterize the simulator lying on its back.
- · Perform female catheterization exercises with the urethra plug connected.





- · When practicing urinary catheterization, separate the labia minora to examine the urethral opening. The realistic simulation of the vulva area also permits instruction in asepsis and disinfection.
- · Use an 18 Fr catheter, as smaller catheters may cause leakage.
- · Lubricate the distal end of the catheter before insertion

MALE CATHETERIZATION

· Catheterize the simulator in the upright or recumbent position.

- · The realistic simulation of the male genitalia also permits instruction in asepsis and disinfection.
- Use an 18 Fr catheter, smaller catheters may cause leakage.
- · Lubricate the distal end of the catheter before insertion.

ASSEMBLY INSTRUCTIONS

1. Remove the red adaptor from the urethra.



Do not throw the red adaptor away since it is necessary to perform female catheterization exercises.

2. Gently slide the tube from the male organ into the opening of the urethra and attach the

