J-150 Subpalpebral Ocular Lavage Catheter
Directions for Use

The subpalpebral ocular lavage catheter is designed to keep a lavage catheter in situ for an extended period of time. Medication can readily be administered via the long tubing. The proximal tip of the catheter is a disc that will lie flat against the inside of the eyelid.

Components:
- 12g x 3” hypodermic needle J-174eh
- 5fr silicon lavage catheter PJ-150
- 22g blunt needle
- Male luer lock adapter J-463L

Directions for Use
(General Anesthesia is recommended for proper placement)
1. The upper eyelid and surrounding area is surgically prepared
2. A site is selected on the upper eyelid off the mid-line usually to the lateral aspect. The catheter disc should not be contacting the cornea.
3. The upper eyelid is retracted outward with a tissue forceps.
4. The 12g x 3” needle is passed through the eyelid. The hub is on the outside and the needle point on the inside of the eyelid.
5. The catheter is passed up the needle shaft towards the hub.
6. After a large section of the catheter is passed through, the 12g needle is backed out.
7. The catheter is pulled until the flat disc fits snug against the inner eyelid.
8. 22g blunt needle is now inserted into the open end of the catheter.
9. The catheter tubing is run up the forehead, over the poll, and down the mane.
10. It can be taped to the mane in at least two locations or sutured in place.

Removal
1. Remove all attached areas.
2. Retract the eyelid outwardly.
3. With a second forceps, grasp the flat end disc.
4. Pull the disc end out a few centimeters and then cut off with a scissors.
5. Pull the catheter back out of the eyelid.