

WingEater Trouble Shooting Guide

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PROBLEMS AND COMPLAINTS	PROBABLE CAUSE OF PROBLEM	SUGGESTIONS
Needles are dull or not sharp enough, causing pain	Sticking angle is too low Skin is wrinkled Some patients are more sensitive than others	 Stick at an angle of 25 ° - 45 ° Stretch the skin Medicate the skin before the stick if the patient requests
WingEater guard, causing pain or pinching the patient access	WingEater guard is too far from the wings Putting too much pressure on the guard and patient's access	Move the guard closer until it touches the wings and begins to fold them Hold or support the guard with your thumb or index finger Do not put pressure on the site until the needle is completely out
Wings are hard to retract into the safety guard	Guard is not touching the wings Tubing is not in alignment with the guard	Slide WingEater up until it touches the wings and begins to fold them Make sure the tubing is in the middle of the guard
Blood splashing during retraction	Not using the right technique: a. Using one hand technique b. Needle pulled half way out	Pull the tubing until the needle is completely retracted into the WingEater Put pressure on the site as soon as the needle is removed
Wings do not fold well when the bevel is facing down	Tubing is not in alignment with the guard	 Pull the needle slowly and make sure the wings and the tubing are in alignment Hold the guard between the thumb and index finger when retracting the needle
Wings are too soft and not getting enough leverage	Wings has to be soft in order to fold and retract properly	Hold the needle lower, with the wings and cannula together Bring the wings together and lock studs and holes together
Needle does not retract completely into the safety guard	Improper technique: Used one hand technique	Use two hand technique Continue pulling the tubing until wings are below the safety line marked across the upper membrane of WingEater
Needle tends to turn left or right causing pain and bleeding around the site	Wings are not locked together properly	Bring the wings together and lock studs and holes together
Hard to pull the needle into the guard when Sureseal is used on the site	Sureseal is been placed on the wings and is sticking to them	Put the Sureseal on the site only; not covering the wings Do not put pressure on the site until the needle is completely out
Needle tubing is hard to pull because the tubing is too soft and stretching	Tubing is been held too far from the WingEater guard	1. Hold tubing approx. 1 inch behind the WingEater guard
Bleeding or oozing around the site	 Needle inserted at the wrong angle Patient's skin is very thin Patient is taking a blood thinner Nurse sticks a few times before she/he finds the vein 	 Stick at an angle of 25 ° - 45 ° Do not stick in the same hole unless patient is using buttonhole technique Check the medication level in the blood Before you stick, assess the patient's access
Can not pull both needles if the needles are too close to each other	Needles are too close to each other and space is limited	Use the holding technique, holding the guard between your thumb and index finger
The position of the fingers and placing on the guard is awkward	1. Staff is use too using a different technique	1. See the video, disc or brochure, get an in-service and practice
Needle moves when the guard is slid into place	One hand is used to move the guard The tape is not on the wings to stabilize the needle	Use two hands to slide the WingEater guard up into position Keep one tape on the wings while you slide the guard into position
Can not pull both needles at the same time and hold the patient's access	Using two hand technique and not using the middle and ring finger	Use middle and ring finger to hold the patient's site Ask the patient to hold one site for you till you retract the second needle