

PHOTOTHERAPY LIGHT SHIELDS - INSTRUCTIONS FOR USE

CLINICAL APPLICATION

Viamed phototherapy light shields and phototherapy oxygen hoods provide an alternative to traditional eye masks. They are manufactured from Amber 300 Perspex® and are designed to reduce the intensity of light - as well as blocking ultraviolet and blue light in the range of 300 - 500 nm.

Part number	Description	Application
PP8400	Phototherapy light shield – Size 1.	Only for use with PP8000 (clear) oxygen hood – Size 1. Do not use as a stand-alone light shield.
PP8559	Phototherapy light shield – Size 2.	Only for use with PP8050 (clear) oxygen hood – Size 2 Do not use as a stand-alone light shield.
PP8689	Phototherapy light shield - Size 1b. With front neck aperture, open at the rear.	To be used as a stand-alone light shield. Designed for use in incubators.
PP8510	Phototherapy light shield – Size 1. With front neck aperture, open at the rear.	To be used as a stand-alone light shield.
PP8560	Phototherapy light shield – Size 2. With front neck aperture, open at the rear.	
PP8509	Phototherapy oxygen hood – Size 1.	
PP8533	Phototherapy oxygen hood – Size 2.	For use as a combined phototherapy light shield and oxygen hood. Please refer to Instructions for Use 0490050.
PP8562	Phototherapy oxygen hood – Size 3.	

APPLICATION NOTES

- PP8400 & PP8559 light shields must only be used in conjunction with the associated size oxygen hoods: PP8000 & PP8050. Ensure that the light shield fits on top of and fully covers the oxygen hood. Phototherapy should be directed through the top and/or the sides of the light shield - do not direct any of the phototherapy towards the open ends of the shield.
- PP8689, PP8510 & PP8560. These are designed to be used as standalone light shields. Phototherapy should be directed through the top and/or the sides of the light shield - do not direct any of the phototherapy towards the open end of the shield.
- Note that with small infants, it is advisable that light shields are pre-warmed before being placed over the infant, as the infant may contribute some of their body heat to warm a cold light shield. This is only important if the infant is less than 1500g (roughly 32 weeks gestation or below).
- Temperature under the light shield should be monitored to avoid overheating and under heating of the infant. Over heating may cause apnoea and dehydration.

CLEANING / DISINFECTION

Viamed Ltd recommends adherence to local hospital protocols and disinfection fluid instructions for use. Disinfection must be achieved by use of a hospital-authorised disinfectant.

Unless the device has been contaminated with body fluid, it is usually adequate to clean thoroughly with neutral detergent, then rinse and dry. If there is contamination the device must be cleaned thoroughly prior to disinfection to remove all organic matter and other residue. If the disinfectant contains bleach (sodium hypochlorite), the minimum concentration recommended by the disinfectant manufacturer should be used to prevent discolouring and crazing.

In the absence of the disinfectant manufacturers' advice the following strengths can be used as a guide:

- Heavy contamination with blood – 10,000 ppm available chlorine.
- Without gross contamination – 1,000 ppm available chlorine.
- Special attention should be paid to cleaning the surface with neutral detergent until it is completely free of the disinfectant solution, then rinse and dry.



- Cracked surfaces can harbour contamination.
- Do not use glutaraldehyde or phenolics, due to their toxicity.
- Do not use organic solvents, as they will cause crazing.