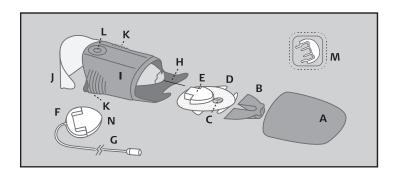


t:30™ Infusion Set – Preparation and insertion

Read all instructions carefully before using the t:30 Infusion Set. For information about pump therapy, possible errors, and potential risks and their causes, consult your pump manufacturer's instructions for use before connecting the infusion set. Follow proper hygiene procedures.





CONTENTS

- A. Lid
- **B.** Needle protector
- C. Soft cannula
- **D.** Adhesive

- E. Cannula housing
- F. Connector
- G. Tubing
- H. Introducer needle
- Insertion device
 - J. Sterile paper

IMPORTANT NOTE!

- **K.** Lined indentations hold here when loading t:30 (see Figure 7)
- L. Release buttons press here when releasing t:30 (see Figure 9)
- M. Disconnect cover
- N. Circular protective cap

INSTRUCTIONS FOR USE:

The t:30[™] infusion set is indicated for the subcutaneous infusion of insulin administered by an external pump.

DESCRIPTION

t:30 is an angled infusion set with an integrated insertion device. The built-in legs support a 30° insertion angle. t:30 is delivered ready for use. Both t:30 and the separate tubing unit are sterile.

CONTRAINDICATIONS

t:30 is neither intended nor indicated for intravenous infusion (I.V.) of medication, including blood and blood products.

WARNINGS

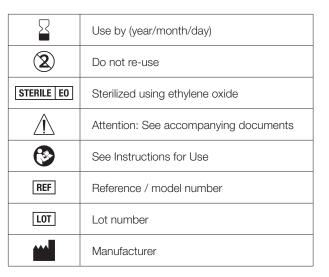
- t:30 is only sterile and non-pyrogenic if it is unopened and undamaged. Do not use if the sterile paper or the red seal have been broken.
- Read the instructions for use carefully. Failure to follow the instructions may result in pain or injury.
- Use t:30 for the first time in the presence of your healthcare provider. When possible, stand or sit upright when using t:30.
- Do not put perfumes, deodorants, cosmetics or other products containing alcohol or disinfectants in contact with the connector or the tubing. This may affect the integrity of the infusion set.
- t:30 is a single use device. Do not clean or re-sterilize.
- Put the lid back on the insertion device for safe disposal. For available sharps containers please consult your local pharmacy.
- Remove the needle protector before use.
- When priming, make sure there are no air bubbles in the tube
- Inaccurate insulin delivery, infection and/or site irritation may result from improper insertion or maintenance of the infusion site.
- Replace the infusion set every 48-72 hours, or per your healthcare professional's instructions.
- If the soft cannula bends during insertion, apply a new t:30.
- Replace the infusion set if the adhesive tape becomes loose.

- Check the infusion set frequently to ensure that the soft cannula remains firmly in place. Replace with new set, if the set is not in place. Since the cannula is soft, it will not cause any pain if it slips out, and this may happen without notice. The soft cannula must always be completely inserted to receive the full amount of medication.
- If your infusion site becomes red or inflamed, replace the infusion set and use a new site until the first site has healed.
- Do not re-insert the introducer needle into the infusion set. This could cause tearing of the soft cannula and unpredictable medication flow.
- Never try to fill or free clogged tubing while the infusion set is inserted. This may result in unpredictable medication flow.
- Wash your hands before disconnecting and reconnecting the infusion set. Consult your healthcare provider on how to compensate for missed medication while disconnected.
- Protect t:30 from direct sunlight and humidity.
 Store in a dry place at room temperature.
- Never point a loaded insertion device towards any body part, where insertion is not desired.
- Reuse of the infusion set may cause infection, site irritation, or damage to the cannula/needle.
 A damaged cannula/needle may lead to inaccurate medication delivery.

RECOMMENDATIONS

For use with insulin: Check your blood glucose level 1-2 hours after insertion to ensure correct insertion/flow.

- Check the infusion site several times a day.
- Do not change your infusion set just before bedtime, unless your blood glucose can be checked 1-2 hours after insertion.
- If your blood glucose level becomes unexplainably high or an occlusion alarm occurs, check for clogs and leaks.
 If in doubt, change your infusion set.
- Carefully monitor your blood glucose levels when disconnected and after reconnecting.



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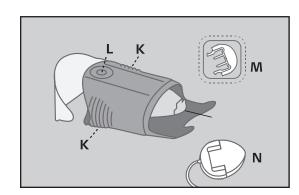
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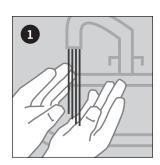
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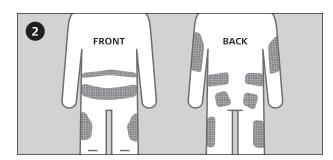
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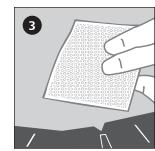
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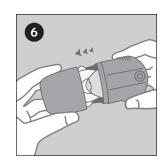


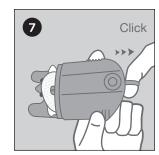




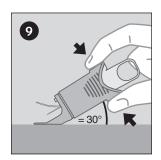


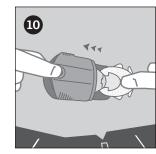


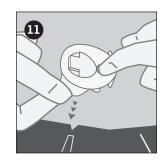


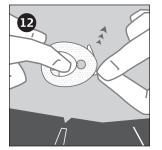




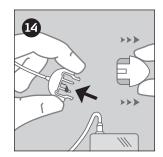


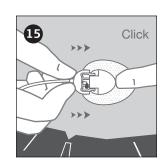












- **1.** Wash your hands before inserting t:30[™].
- 2. Recommended insertion areas.

 Do not use an area right next to your previous place of insertion.

 Please refer to your healthcare provider for infusion site rotation.
- 3. Clean the area of insertion with a disinfectant as directed by your healthcare team. Be sure the area is dry before inserting t:30.
 CAUTION: Check the tamperproof seal and sterile paper. Do not use if the seal or paper have been broken.
- **4.** Pull the red tape to remove the seal.

- **5.** Pull off the sterile paper. Do not touch the spring at this stage.
- **6.** Hold onto the lined indentations with one hand and pull the lid off with the other.

CAUTION: Be careful not to bend or touch the t:30 introducer needle.

IMPORTANT NOTE: If the infusion set is not securely placed in the insertion device with the needle pointing straight ahead, pain or minor injury may occur during insertion.

7. Place your fingers on the lined indentations on each side.
Pull back the spring softly until you hear a "click". The needle protector will lift up or peel off.
Do not touch or bend the needle.

- **8.** Immediately before insertion, carefully remove the needle protector. Be sure the tape is not stuck onto the introducer needle.
- 9. INSERTION: Place your index finger on the top release button and your thumb on the bottom release button. Position t:30 with its legs flat on the skin to ensure an insertion angle of 30°. Make sure to maintain a 30° angle while inserting and gently squeeze once to insert t:30.
- **10.** Make sure that the cannula stays in place: Put your finger gently on the clear window while removing the insertion device and introducer needle. Pull it gently straight back.

- 11. Secure the cannula with one finger on the clear window. Carefully remove the backing paper under the cannula housing as shown.
- **12.** Remove the backing paper under the front end. Massage the adhesive thoroughly onto the skin.

IMPORTANT: Do not attempt to straighten the adhesive if curled.

- 13. Put the lid back on for disposal.
- 14. Remove the circular protective cap. Prime the infusion set until medication dispenses from the tip. Ensure there are no air bubbles in the tubing or t:30. Consult your pump manufacturer's instructions

for use for proper priming procedures.

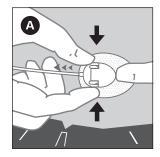
15. Place a finger in front of the cannula housing and insert the connector needle. Make sure the connector locks with a "click". Fill the empty space in the cannula with the following prime:

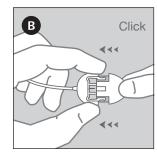
U-100 insulin:

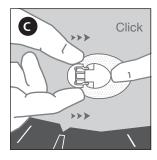
13 mm: 0.7 units

TO DISCONNECT

- **A.** The t:30 allows you to temporarily disconnect your pump without having to change the infusion set. Place a finger just in front of the cannula housing and gently squeeze the sides of t:30. Pull the connector needle straight out.
- **B.** Insert the circular protective cap into the connector needle until you hear a "click".
- **C.** Insert the disconnect cover into the cannula housing until you hear a "click".

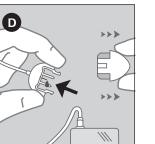


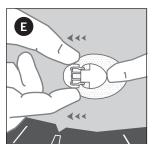




TO RECONNECT

- Remove the circular protective cap. Prime the infusion set until medication dispenses from the needle.
 - **CAUTION:** When priming, hold t:30 with the needle pointing down.





- **E.** Remove the disconnect cover from the cannula housing.
- **F.** Place a finger in front of the cannula housing. Push the connector needle straight in until you hear a "click".

