



The Beata Clasp® Line Organizer Guidelines

What is the Beata Clasp®:

The Beata Clasp is a product that assist to organize and maintain medical tubing, lines, and drains for patients, nurses, and hospitals. This product is made of a soft foam that attaches without the use of adhesives to medical equipment such as patient bedrails, IV stands, wheelchairs, and walkers.

Medical tubing, lines and drains fit securely into the product's bank of circular grooves. The clasp assists to prevent line impingement, dislodging and entanglement by holding tubes in place. The simple technology assists to reduce the risk of adverse incidents and contamination by keeping lines off the floor and easily traceable.

Hospital Tubing and Line Organization System (Beata Clasp®)

Purpose of guidelines: To provide a safe environment for patients, staff, and visitors in settings where there is an abundance of various types of medical tubing, cords, and lines. To reduce or prevent the risk of adverse events such as tubing from becoming dislodged, impinged, tangled, and contaminated. To create a set of standard nursing practices when connecting or disconnecting tubing and catheters to or from a patient; there by making tubing easily traceable and preventing possible tubing misconnections and medical errors.

Tubing or catheter types can be, but are not limited to, the following:

- Peripheral Intravenous Tubing
- Central Venous Catheters
- Umbilical Arterial Catheter Tubing (UAC)
- Umbilical Venous Catheter (UVC)
- Percutaneous Intravenous catheter (PIC)
- Peritoneal Dialysis Catheters
- Tracheotomy Cuff Inflation Tubes
- Bladder (Foley) Catheters
- Nasogastric Tubes
- Oral Gastric Feeding Tubes
- Percutaneous Feeding Tubes
- In-Line Suction (Ballard)
- Blood Administration Tubing
- Ventriculostomy Tubing
- Epidural Catheters
- Arterial Lines
- Intra-Aortic Balloon Pump (IABP)
- Chest Tube
- Nasal Canula

Line and cords can be, but are not limited to, the following:

- Nurse Call Light
- Bed Extension Controls
- Equipment Extension Cords
- Pulse Oximetry Cords
- Automatic Blood Pressure Cuff Inflation Tubes
- Patient's Personal Electronic Charging Cords

Procedure for use of Beata Clasp® Attachment of Beata Clasp®:

Attach a Beata Clasp® (Line Organization System) to the side of the bedrail where lines and tubing travel over to the patient. If lines and tubing are present on both sides of the bed, place a Beata Clasp® on both the left and right bed rail. To attach the Beata Clasp®, clean the surface of the bedrail, separate the bottom longitudinal slit of the organizer, and slide the organizer onto edge of bedrail.

Instructions for use of Beata Clasp®

Align all tubing and lines through the vertical slots along the top part of the device. Check for passive movement of each line. If restriction is felt, do not use in device. If additional lines are present than grooves in Beata Clasp® an additional Beata Clasp® may be used on the same bedrail. Do not permanently affix lines to the Beata Clasp®.

Beata Clasp® may be transferred to a wheelchair arm, front wheel walker, or IV pole. Follow bedrail instructions for attachment, use, and removal of Beata Clasp® from wheelchair arm, front wheel walker, or IV pole.

Inform non-clinical staff, patients, and their families that they must get help from clinical staff whenever there is a real or perceived need to connect or disconnect tubing or move the Beata Clasp®

Instructions for cleaning of Beata Clasp®

Clean the Beata Clasp® with soap and water, germicidal or bleach solutions according to hospital policy for hard surfaces. Discontinue use of the Beata Clasp® if visual tears are seen to product.

The Beata Clasp® must be cleaned between patient use.

Clean the Beata Clasp® during routine cleaning of high touch areas of patients' room according to hospital policy.

Do not autoclave the Beata Clasp®.

Removal of Beata Clasp®:

To remove the Beata Clasp®, first remove all lines between vertical grooves. Then firmly grasp the device and pull away from the bedrail. The Beata Clasp® may be cleaned and inspected for tears prior to reuse, cleaned and sent home with patient, recycled as #7 TES, collected and sent back to the manufacturer, or disposed of in the trash.

Recommended procedures for tubing and lines:

Before attaching tubing to a patient, label the tubing near the connection point with the name of any fluid infusing and note the route of fluid by indication: IV, epidural, pressure line, feeding tube or specified other on the label.

Before connecting any new device or infusion to a medical tubing, always trace the tube or catheter from the patient to the point of origin.

Recheck connections and trace all patient tubes and catheters to their source upon a patient's arrival to a new unit or department.

Turn on the light in a darkened room before connecting or reconnecting tubes or devices.

If a line disconnects in an area without a nurse, the clinical team member on the department where the patient is currently located, should notify the nursing unit of the disconnection. Nursing will determine need for immediate reconnect and provide nursing support for the reconnect if deemed necessary.

Never use a standard luer syringe for oral medications or enteric feedings.

