

Simple and safe catheter securement



Why secure your catheter?

Without securement, indwelling catheters can lead to **serious complications** including ulceration of the bladder and urethra and genital damage.¹ Evidence also suggests that unsecured catheters may increase the **risk of infection**.² For these reasons, securement of your catheter is an '**essential component of catheter care**'.³



Why use the LockBand® to secure your catheter?

Simple

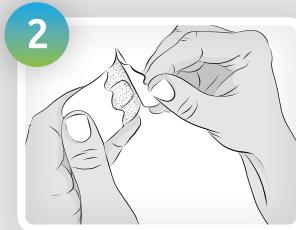
- Application and removal is as simple as an ordinary plaster
- Catheter connection and disconnection only requires a single push, no clips or straps involved

Safe

- Skin-friendly, hypo-allergenic adhesive and soft non-woven surface
- Hook connects to the inflation arm and not the drainage lumen, ensuring that the drainage lumen remains open for high urine flow
- Elasticated band allows the catheter to move with your body
- Medical grade adhesive ensures that your catheter stays in place even when a full leg bag is attached
- Protects the bladder and urethra from damage caused by frequent catheter movement

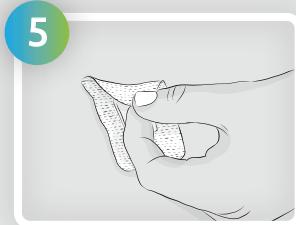
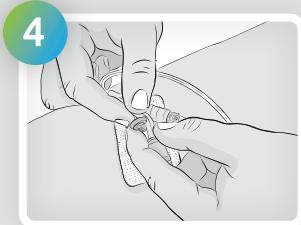
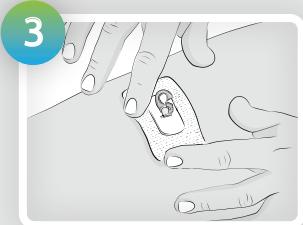
LockBand®

5 simple instructions for use:



Clean the skin and pat dry
the area where the
LockBand® will be applied

Remove LockBand® from
package and peel away
backing protection paper to
reveal sticky back



Apply carefully to the skin

Insert catheter balloon
inflation tube into catheter
holder

To remove, release the
catheter from the clip, then
slowly lift and peel the
adhesive backed material

Product Description

LockBand® Catheter
Securement Device

Pip Code

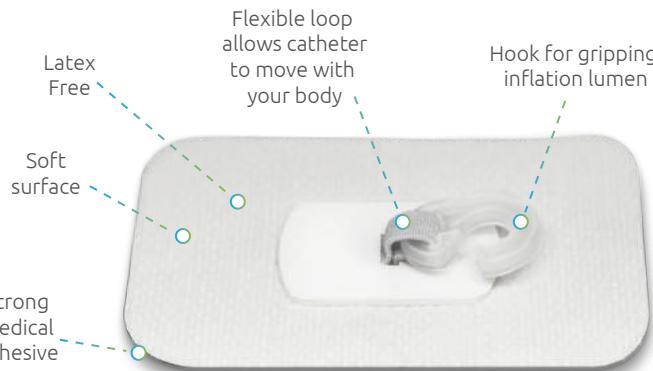
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Product Code

LB-F01

Units per Pack

10



✓ **Urethral catheters**

✓ **Suprapubic catheters**

✓ **7 day recommended wear time**

1. Wilson, M. C. Urinary catheter securement : what are the options ? *Nurs. Resid. Care* 17, 620–623 (2015). **2.** Carignan, M. Mechanical Reduction of Catheter-Associated Urinary Tract Infection Risk. *Infect. Control Today* 1–10 (2004). **3.** Freeman, C. Why more attention must be given to catheter fixation. *Nurs. Times* 105, 35–36 (2009).

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