**INDICATIONS FOR USE:**
The MZ1000-07 is a sterile single patient use connector for needleless access to the IV line and/or IV catheter during IV therapy. The MZ1000-07 can be used for direct injection, intermittent infusion, continuous infusion or aspiration.

**Description:**
The MZ1000-07 is a closed luer activated device and passively aids in the reduction of needlestick injuries. Fluid flow through the device is activated by the ISD male luer from standard administration sets, extension sets, or syringes. Upon disconnection of a male luer from the MZ1000-07, fluid is expelled from the catheter tip, preventing blood from entering back into the catheter or anti-reflux. Anti-reflux is defined as no net change in fluid volume that is less than zero when a male luer is disconnected from the connector, also known as zero reflux and neutral reflux. This feature helps to prevent blood reflux into the catheter at disconnection which allows for the practice of saline-only flushing and eliminates the need for a specific clamping sequence or technique, also described as “clamping neutral,” “neutral clamping sequence,” or “neutral clamping sequence.”

The MZ1000-07 provides a solid, sealed, surface for effective disinfection in three seconds. This patented solid, sealed surface is intended to reduce the possibility that the intraluminal fluid pathway of the device may become microbiologically contaminated. It is non-hemolytic. The near-housing and open, fluid filed design of the MZ1000-07 enhances flushing practices. There is no interstitial or dead space internal to the connector. The MZ1000-07 may be used with power injector procedures to a maximum pressure of 325 psi at a flow rate of 10 mL per second.

**DIRECTIONS:**
Use aseptic technique. Single Use Only – Do Not Resterilize

1. Carefully peel the package and attach a pre-filled flush syringe and prime the device, eliminating all air and sealing internal surfaces.
2. Attach primed IV set or syringe with flush priming solution to the MZ1000-07. Invert the connector and prime taking care to remove all air.
3. Remove the protective cover and attach MZ1000-07 to the hub of the extension set or vascular access device by inserting luer into the hub and rotating until secure. Do not overtighten.
4. Prior to every access, always scrub the top of the MZ1000-07 with an appropriate antiseptic and allow to dry.
5. Attach luer from primed IV set or syringe to the MZ1000-07. If luer is a two piece spin collar, first pull back the collar and insert luer in a straight in motion and rotate ½ turn clockwise; then on collar forward and tighten. If syringe has a luer slip, insert and rotate ¼ turn clockwise to secure connection. Do not leave luer unattended.
6. Flush the MZ1000-07 after each use with normal saline or in accordance with facility protocol.
7. To disconnect male luer from MZ1000-07, hold and rotate mating luer until disconnected. Wipe connector surface dry by swabbing surface after disconnection.
8. For flush volume calculations, use 0.16 mL for the MaxZero device.

**Warnings, Cautions and Recommendations:**
- The device should not be used with needles, blunt cannula systems, non ISO luer connections, or luer connections with visible defects. Doing so may result in leakage and/or failure of the device.
- Luer slip connections should not be left unattended due to potential for disconnection.
- For proper use, clinicians must be familiar with and trained in the use of the MZ1000-07 device. Use should be preceded by an established facility protocol. The device should be disinfected with an appropriate antiseptic agent, such as 70% IPA, prior to each access.
- The device is intended for use with ISO luer lock and luer slip connectors provided on standard IV administration sets, extension sets, and syringes.
- Trace lines before connection. Verify the line being connected to the MZ1000-07 is the appropriate Intravenous Therapy line.
- Failure to properly prime the device can result in reflux.
- Inconsistent clamping practice may result in increased residual fluid on the access surface.
- Wiping dry between each access and upon removal of final flush syringe helps to eliminate moisture on connector surface.
- Power infusion procedures should not exceed 325 psi and 10 mL per second.
- Change according to facility protocol or in accordance with current recognized guidelines for IV therapy, such as every 7 days or 200 activations.
- To dispose of this device adhere to local, state, federal and/or other governing regulations for medical device waste disposal and/or bio hazardous waste disposal.
- Sterile disposable single patient use device may be accessed multiple times per hospital protocol. Reuse, reprocessing or re-sterilizing may lead to patient infection or other injury/illness.
- Clamp line when not in use as a safety precaution.
- Flush the connector after each use with normal saline or in accordance with facility protocol.
- This device does not contain metal components.

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