



# Cook-Swartz Doppler probe and monitor troubleshooting guide

## Troubleshooting in the operating room

### If blood flow sound cannot be heard:

1. Irrigate the probe with saline. This will produce a sound and confirm that the probe is functioning.
2. If irrigation confirms that the probe is functioning, check to see if the lack of blood flow sound indicates:
  - A low flow state in the flap or a drop in blood pressure
  - A loose probe, which can be confirmed by pressing the probe and checking snugness
3. If there is still no sound after the previous steps have been followed, the surgeon may palpate the vessel near the location of the probe to check for flow.

**Note:** When leading the probe to the vessel, be careful to allow a natural pathway for the wire from the crystal to the monitor. Make sure there is no tension in the probe wire, because this may prevent the probe from orienting flush against the vessel.

## Troubleshooting outside the operating room

### If blood flow sound cannot be heard:

1. Consider repositioning the patient.
2. Test probe function by pressing or palpating near the probe site for better crystal contact.
3. Make sure the proper channel has been selected.
4. Test the operation of the monitor by pressing the **Test** button and listening for the tone.
5. Test the operation of the channel the extension cable is plugged into using the channel verifier.
6. Test the operation of the extension cable using the extension cable verifier.

**If the unit is functioning correctly and the blood flow sound still cannot be heard, contact the physician immediately.**

## Removing the probe

**After the physician has determined that the flap is healing well and blood flow has been permanently established, the crystal must be removed by following these steps:**

1. Remove sutures (and/or tape) from the wire outside the wound and from the retention tabs.
2. Tug gently on the wire near the crystal to disengage it from the cuff. (Only 0.1 pound of pressure is needed to remove the crystal from the cuff.)
3. Leave the silicone cuff; it remains permanently in place around the vessel.

**Note:** Alternative methods of discontinuing use of the probe, such as cutting the wire and tucking it into the wound, are not recommended and are contrary to approved Instructions for Use. See the IFU for full operating instructions.