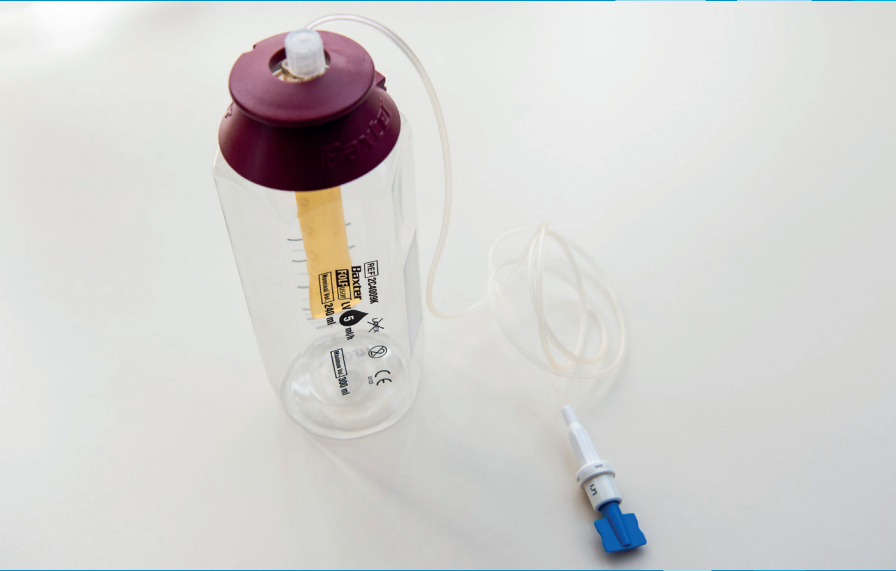




Infusor[®]: antibiotics administered via an infusion pump

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Some antibiotic treatments are administered with an Infusor[®], also referred to as an infusion pump.

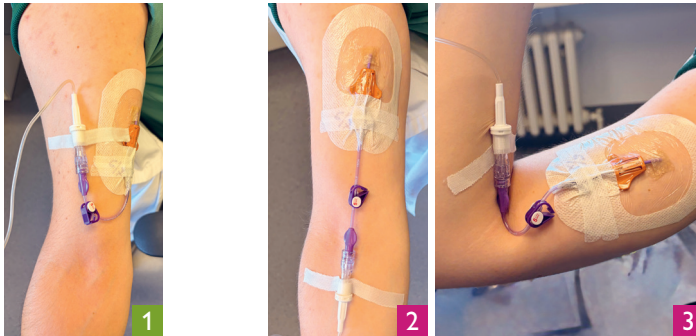
This brochure explains how treatment with an Infusor[®] works, what you should be aware of if you are having treatment with an Infusor[®] at home and what you can do in the event of problems.

If you have questions or problems: please contact the hospital OPAT team (see also useful contact data).

HOW DOES INFUSOR[®] THERAPY WORK?

The antibiotics treatment will be initiated during your stay in hospital, but will continue with Infusor[®] therapy at home.

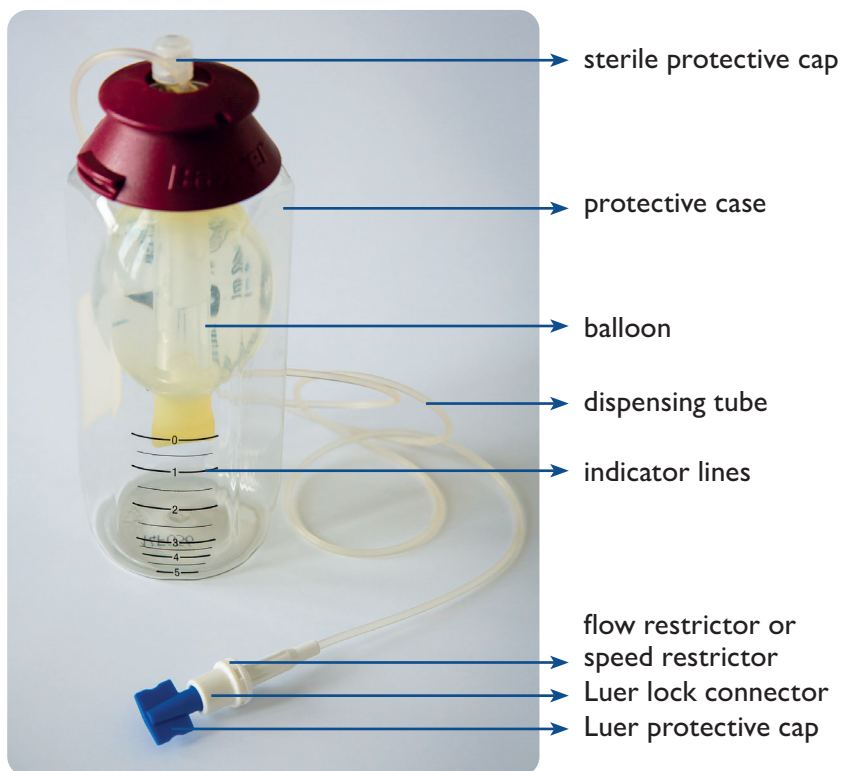
Once you are home, the home nurse will prepare the Infusor[®] with antibiotics and connect it to your catheter once or twice a day. The Infusor[®] tubing must always be secured to the upper arm (see Figure 1) and not below the elbow crease (see Figures 2 and 3), to prevent kinking of the extension tubing of the catheter or the Infusor[®] tubing.



The Infusor[®] will administer your therapy **gradually and at the correct speed**. This dosed administration ensures that **optimum doses** of the therapy are administered and minimises any side effects.

Because an Infusor[®] consists of a small, portable container, you will be able to continue most of your day to day activities during your treatment.

WHAT DOES AN INFUSOR[®] LOOK LIKE?



HOW CAN YOU BE SURE THAT THE PROCEDURE RUNS AS PLANNED AT HOME?

The Infusor[®] contains a balloon shaped container with the antibiotics. When it is switched on you will notice that the balloon in the Infusor[®] is filled with liquid and some air (see photograph on the previous page).

As soon as the Infusor[®] is connected to your catheter the balloon will slowly start to empty. Depending on your treatment, this will take 12 or 24 hours. Your doctor and nurse at the hospital will provide more information about this procedure.

You can verify whether the Infusor[®] is operating at the correct speed by checking the indicator lines on the case (see above photograph).

WHAT SHOULD YOU BE AWARE OF DURING YOUR TREATMENT WITH AN INFUSOR[®] AT HOME?

- You will be provided with a **pouch**, in which to store the Infusor[®], at the hospital. The pouch is worn around the shoulder, as shown in the following photos.
- Make sure that **the tube** is neatly rolled up and that it cannot catch on anything (e.g. on a door handle or chair) to prevent tension on the tube, the catheter or the port needle if a port (catheter) is used.



Too much tension can damage the tube or dislodge the catheter (partly) or the needle from the port, which may result in leaks.



- Ensure that the height **difference** between the Infusor[®] and catheter remains about the same. This will ensure that the liquid in the Infusor[®] can be continually dispensed at the same speed. Place the Infusor[®] alongside you in bed or underneath your pillow during the night. It is not advisable to put it on a bedside table or on the floor.



- The **flow restrictor** on the Infusor[®] is driven by your **body temperature**. The home nurse will attach the flow restrictor for the Infusor[®] to your skin. Make sure that the flow restrictor remains attached to the skin and that the Infusor[®] is not subjected to excessive temperature

fluctuations, as this is also important to maintain a constant flow. Temperatures in excess of 38°C (e.g. in full sun) and frost should be avoided. In winter it is advisable to wear the Infusor® close to the body.



- Make sure that the Infusor® does not come into contact with water. Store the Infusor® in a plastic bag when showering. Do not immerse the Infusor® in water.
- Make sure that the bandage on the catheter stays dry and securely attached. The (home) nurse will cover the insertion point of your catheter or port needle with a sterile bandage. Check regularly that the bandage and plaster are still securely attached. Preferably use a plastic bandage when taking a bath or shower.



- If your health condition allows, you can resume your daily activities with an Infusor® (e.g. walking, leisurely cycling, working ...). But remember that the infusion pump must be kept dry and not exposed to extreme temperatures. If you have been fitted with a port (catheter), avoid brusque movements with the upper body, as this may dislodge the port needle.

WHAT SHOULD YOU DO IN THE EVENT OF A PROBLEM DURING THE TREATMENT AT HOME?

IT APPEARS AS IF THE INFUSOR® IS NOT EMPTYING

- Check the indicator lines on the Infusor® to ensure that it is emptying at the correct speed.
- If the Infusor® is not running at the correct speed:
 - There is a small chance of a **kink in the infusion tube** preventing the administration of the medication. If the fluid is not being dispensed, check whether there is a kink in the tube and remove/clear it if necessary.

- Check whether **the tube is blocked by the clamp**. If the tube is blocked, open the clamp.



The tube is blocked by the clamp.



The tube is not blocked by the clamp.

- Check for **blood** in the **tube**. It should disappear as a result of the kink being removed from the tube or the clamp being opened.

- If after all this you still get the impression that the Infusor[®] remains just as full, contact the hospital or home nurse.

THERE APPEARS TO BE A LEAK

- You will notice the bandage on the catheter becoming damp or wet patches on your clothing or skin.
- Leaks can occur at different locations in the system. First establish **where** the system has developed a leak.

a) There is a leak at the port needle or insertion point of the catheter.

- ✓ Close the clamp on the tube.
- ✓ NEVER replace a tube on a catheter or a port needle yourself. Disinfect the skin with a sterile compress with chlorhexidine 2% and cover the skin with a sterile bandage.
- ✓ Contact your home nurse or the hospital.

b) There is a leak at the level of the connection between the tube on your catheter and the Infusor® tube.

- ✓ The connection has dislodged **completely**:
 - Disinfect your hands with hand alcohol or wash them thoroughly.
 - Close the clamp on the port or catheter.
 - Disinfect the ends of both tubes with a 70% alcohol solution.
 - Reconnect the tubes.
 - Contact the hospital or your home nurse.
- ✓ The connection has **not completely** dislodged:
 - Disinfect your hands with hand alcohol or wash them thoroughly.
 - Moisten a sterile compress with a 70% alcohol solution and hold it underneath the connection between the two tubes.
 - Try to tighten the connection slightly.
 - Wash your hands.
 - Check whether there is still a leak.
 - If the problem has not been resolved contact the hospital or your home nurse.

**c) There is a leak on the tube
(the tube appears broken or cut).**

- ✓ Disinfect your hands with hand alcohol or wash them thoroughly.
- ✓ Close the clamp on the catheter.
- ✓ Place the Infusor® in a securely sealed bag.
- ✓ Contact the hospital or your home nurse immediately.

d) The Infusor® is broken.

- ✓ Disinfect your hands with hand alcohol or wash them thoroughly.
- ✓ Close the clamp on the catheter.
- ✓ Place the Infusor® in a plastic bag.
- ✓ Contact the hospital or your home nurse immediately.

If you have questions or problems: contact the hospital OPAT team (also refer to useful contact data).

HOW LONG DOES TREATMENT WITH AN INFUSOR® TAKE?

The overall duration of your therapy will depend upon the type of infection and how long you previously received antibiotics therapy at the hospital.

The duration of your treatment will be clearly explained by the care providers in charge of your treatment at the hospital.

HOW DO YOU KNOW WHEN THE INFUSOR® IS EMPTY?

The care providers at the hospital will tell you in advance how long a single Infusor® will take. This will be 12 or 24 hours depending on the type of antibiotic you are being treated with. Ask your home nurse to record the administration start time on the Infusor®.

The Infusor® will be completely empty when you see eight raised ‘bobbles’ on the empty balloon.

WHAT SHOULD YOU DO WHEN THE INFUSOR® IS EMPTY?

When your Infusor® is empty the home nurse will disconnect it from the catheter.

When the Infusor® has been disconnected the home nurse will prepare and connect a new Infusor® to your catheter if you need further treatment with antibiotics.

Your home nurse will find additional information on how to disconnect and prepare a new Infusor® in the preparation procedure details enclosed with the unit.

Any material needed by the home nurse to disconnect the empty Infusor® and prepare and connect a new Infusor® will be provided by the hospital pharmacy. You will be provided with this material when you are discharged from hospital.

USEFUL CONTACT DATA

✓ OPAT team at the hospital:

- By telephone: +32 16 34 32 74 (can be reached between 08.30 and 16.30 on working days)
- By email: OPAT@uzleuven.be. Your question will be answered as soon as possible, but it can take up to 48 hours. Emails are not read at weekends.

This brochure can also be found at
www.uzleuven.be/en/brochure/700821.

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Design and Production

This text was composed by the hospital pharmacy in conjunction with the Communications Department.

This brochure can also be accessed at www.uzleuven.be/en/brochure/700821.

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