



# MiniMed® 640G System<sup>^</sup>

INFUSION SETS AND RESERVOIRS



« it thinks »

## Welcome

This guide will introduce you to our range of MiniMed® 640G insulin pump consumables, how to use them with your MiniMed® 640G System<sup>^</sup>, infusion set management, tips on taping, and products available in Australia.

Infusion set management, tapes and adhesives play an important role in your day-to-day life. The information here is intended as a guide. You may want to check with your healthcare professional about what may be best for you.

let's get  
started!

<b>Section 1: What are Infusion Sets and Insulin Reservoirs</b>	<b>4</b>
1.1 Pump Mechanics and the Delivery of Insulin	4
1.1.1 Infusion Set	4
1.1.2 Reservoir	4
1.1.3 Pump	4
1.2 Why use MiniMed® Infusion Sets?	5
1.2.1 MiniMed® infusion sets	5
1.2.2 MiniMed® reservoirs	5
<b>Section 2: MiniMed® Infusion Sets</b>	<b>6</b>
<b>Section 3: Choosing Your Infusion Set Site</b>	<b>8</b>
3.1 Choosing Your Infusion Set Site	8
<b>Section 4: Changing Your MiniMed® Infusion Set</b>	<b>9</b>
4.1 Changing the MiniMed® mio® Infusion Set with the MiniMed® 640G Insulin Pump	9
4.2 Changing the MiniMed® Silhouette™ Infusion Set with the MiniMed® 640G Insulin Pump	15
4.3 Changing the MiniMed® Quick-set™ Infusion Set with the MiniMed® 640G Insulin Pump	21
4.4 Changing the MiniMed® Sure-T® Infusion Set with the MiniMed® 640G Insulin Pump	27
<b>Section 5: Infusion Site Management</b>	<b>32</b>
5.1 Infusion Site Management	32
5.1.1 Rotating Your Sites	32
5.1.2 Replace Infusion Set and Reservoir Every 2 to 3 Days	32
<b>Section 6: Tips and Troubleshooting</b>	<b>32</b>
6.1 Tips for Securing Your Site	33
6.2 Removing Your Adhesive	33
6.3 Tips for Special Circumstances	34
6.3.1 Pain on Insertion	34
6.3.2 Site Change Awareness and Absorption Change	34
6.3.3 Skin Sensitivities, Allergies, and Skin Reactions	35
6.3.4 Pregnancy	35
6.4 Basic Troubleshooting	35
6.5 When To Call	35
<b>Section 7: Ordering Products</b>	<b>36</b>
7.1 Infusion Sets & Reservoirs	36
7.2 Preps and Wipes	37
7.3 Tapes, Adhesives and Dressings	37
7.4 Adhesive Removers	37

## 1.1 Pump Mechanics and the Delivery of Insulin

Before we begin, let's make sure you know how insulin is delivered when using an insulin pump. The parts that make up the pump's delivery system are the infusion set, the reservoir, and the pump.

### 1.1.1 Infusion Set

The infusion set consists of tubing (1) that carries insulin from the pump to you. On one end of the tubing is the reservoir connector (2) that attaches to the reservoir which holds the insulin. On the other end is the insertion site section (3) that attaches to you.

The insertion site section has a small insertion needle that places a tiny flexible tube called a cannula (4) into your body\*\*. Once the infusion set is inserted, you remove the needle, leaving just the cannula behind. A small piece of adhesive (5) holds the infusion set in place.

### 1.1.2 Reservoir

The reservoir is similar to a syringe and holds 2- to 3-days supply of insulin. The reservoir fits into the pump's reservoir compartment (6). **You will be replacing both the infusion set and the reservoir every 2 to 3 days.**

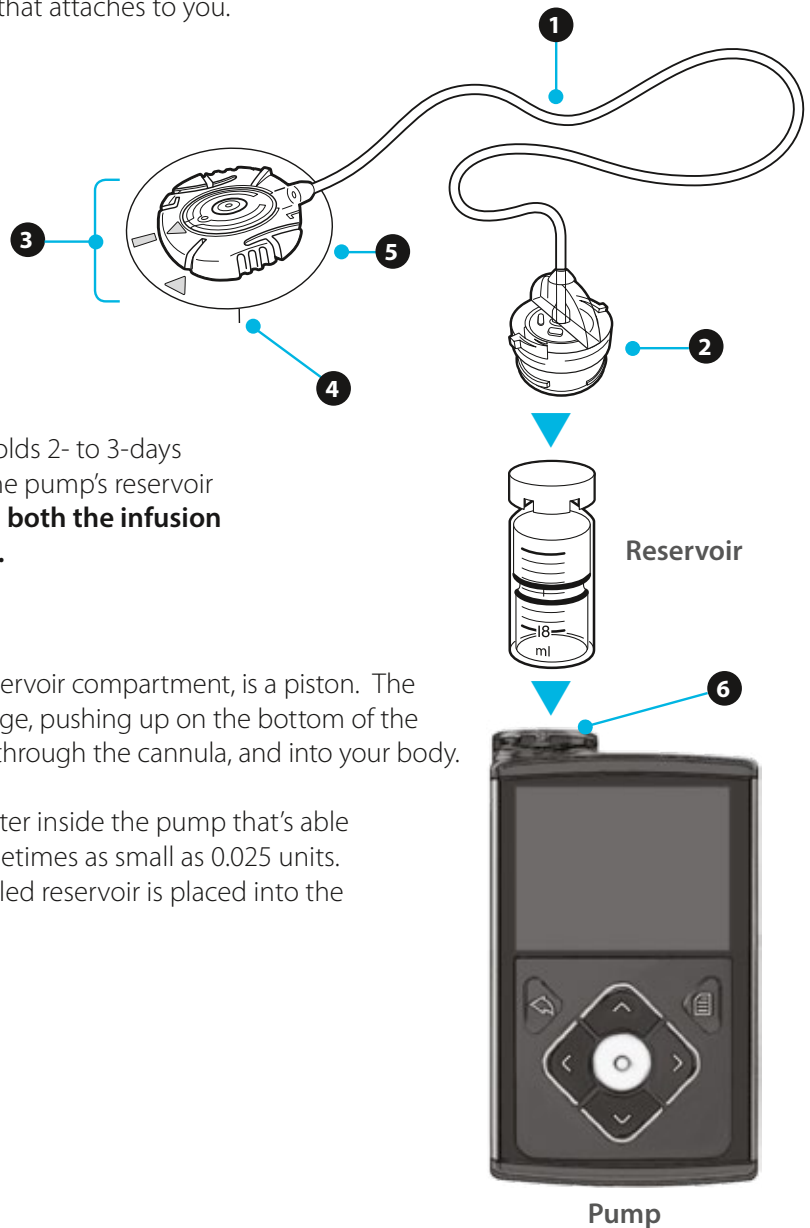
### 1.1.3 Pump

Inside the pump, at the bottom of the reservoir compartment, is a piston. The piston acts like the plunger rod on a syringe, pushing up on the bottom of the reservoir, moving insulin into the tubing, through the cannula, and into your body.

The piston is controlled by a mini computer inside the pump that's able to deliver insulin in very small doses, sometimes as small as 0.025 units. It must be rewound each time a newly filled reservoir is placed into the reservoir compartment.

#### Infusion Set\*

- 1 Tubing
- 2 Reservoir Connector
- 3 Insertion Site Section
- 4 Cannula
- 5 Adhesive
- 6 Reservoir Compartment

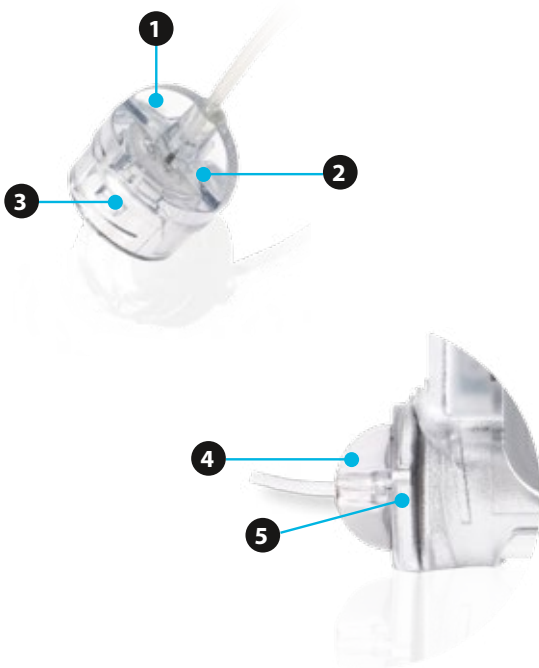


\*MiniMed® Quick-set™ infusion set shown in illustration.

\*\*Some infusion sets do not use a cannula but have a small needle that remains inserted in the body.

## 1.2 Why use MiniMed® Infusion Sets?

### 1.2.1 MiniMed® infusion sets



- 1 **Ergonomic** - The MiniMed® connector has a larger surface, making it easier to grip than luer-lock connectors.
- 2 **Vents** - Unlike luer-lock sets, vents are built into each connector and are replaced with each new infusion set. This allows pressure equalisation in the reservoir and reduces clogging and malfunction that can occur if vents are built directly into the pump itself.
- 3 **Airtight seal** - No insulin delivery will start until the reservoir's silicone membrane is punctured by the connector needle. An audible *click!* indicates that both parts are connected correctly.
- 4 **Integrated reservoir cap** - The cap is securely integrated into the connection, unlike luer-lock systems, where loss or damage to the reservoir cap can lead to pump malfunction.
- 5 **Secured locking mechanism** - The connector snaps into place on both the reservoir and the MiniMed® insulin pump to prevent accidental loosening of the set.

### 1.2.2 MiniMed® reservoirs



- 6 **No assembly required** - The reservoir is ready to be filled once it's removed from the packaging.
- 7 **Less risk of needle injury** - Insulin is transferred to the reservoir via a needle contained within the blue transfer guard.
- 8 **Fits insulin vials and cartridges** - The transfer guard fits easily onto insulin vials and cartridges.
- 9 **Less risk of insulin leakage, even if pressure is applied on the syringe** - A silicone membrane provides an airtight seal on the reservoir once the transfer guard is removed.
- 10 **Rounded shape** - Helps eliminate air bubbles during reservoir filling to promote consistent insulin delivery.

## Section 2 | MiniMed® Infusion Sets

MiniMed® infusion sets are designed with your body and lifestyle in mind. Whether you are new to insulin pump therapy or an experienced user, we have a set to suit you.



### Why choose the MiniMed® mio®?

The MiniMed® mio® infusion set is an *all-in-one* (combines the infusion set and insertion device into one unit) design, offering convenience while on the go.

The straight 90° angle, soft cannula set is suitable for both children and adults of average to heavier build.

- Convenient - Integrated 'all-in-one' infusion set and insertion device
- Practical - Rigid box can be carried and stored anywhere
- At-a-glance site inspection made possible with the clear window inset
- Easy at-site disconnection - Press and pull motion
- Fun - 3 colours\* to choose from (Blue, Pink, and Clear)

\* 45 cm tubing lengths available in Pink and Blue only

### Why choose the MiniMed® Silhouette™?

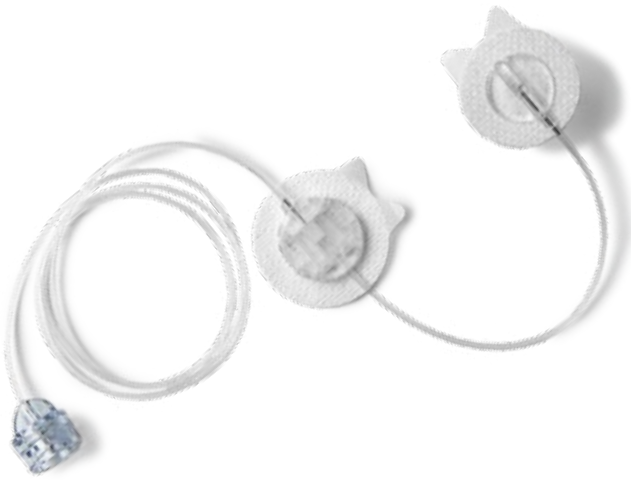
The MiniMed® Silhouette™ infusion set offers comfort and flexibility with its variable angle and soft cannula features.

Popular among insulin pump users with an active lifestyle due to the low profile and adjustable insertion depths. Recommended for leaner children and adults, babies, and during pregnancy.

- **Controlled insertion with optional MiniMed® Sil-serter™.** Manual insertion is also possible, if preferred.
- Flexibility - Adjustable angle insertion allows you to choose the ideal insertion angle and depth
- Easy at-site disconnection - Press and pull motion
- At-a-glance site inspection made possible with the clear window inset

**MiniMed® Sil-serter™**  
**insertion device (MMT-385)**  
for MiniMed® Silhouette™  
infusion set





### Why choose the MiniMed® Sure-T®?

The MiniMed® Sure-T® infusion set was designed with first-time insulin pump users in mind. The very fine, steel needle and dual adhesives of the Sure-T® infusion set make this set ideal for infants and young children of normal to heavier build.

It also appeals to adults - and pregnant women - who prefer a steel needle set or those allergic to Teflon® coating.

- Convenience for children - Tubing connector 10 cm away from insertion site allows disconnection without touching it (press and pull motion)
- Comfort - 29-gauge steel needle is the thinnest available from Medtronic
- Additional adhesive pad for extra security and reduced risk of needle pull-out (if tubing is pulled on)
- Manual insertion
- Alternative choice for those allergic to Teflon® (polytetrafluoroethylene) coated cannulas

### Why choose the MiniMed® Quick-set™?

The MiniMed® Quick-set™ infusion set is easy to insert and has a built-in adhesive. It combines ease of use with maximum comfort.

The versatile design and straight 90° insertion angle of the Quick-set infusion set makes it suitable for children and adults of average to heavier build.

- **Consistent insertion with optional MiniMed® Quick-serter™.** Manual insertion is also possible, if preferred.
- Easy at-site disconnection - Press, turn, lift motion
- Extra security - Optional cap adds protection when disconnected
- Reduce risk of needlestick injury with self-capturer

**MiniMed® Quick-serter™**  
**insertion device (MMT-395)**  
for MiniMed® Quick-set™  
infusion set



### 3.1 Choosing Your Infusion Set Site

Proper infusion site selection and rotation promotes predictable insulin absorption and protects sites from undesirable tissue changes such as hardening and bumps.<sup>1</sup>

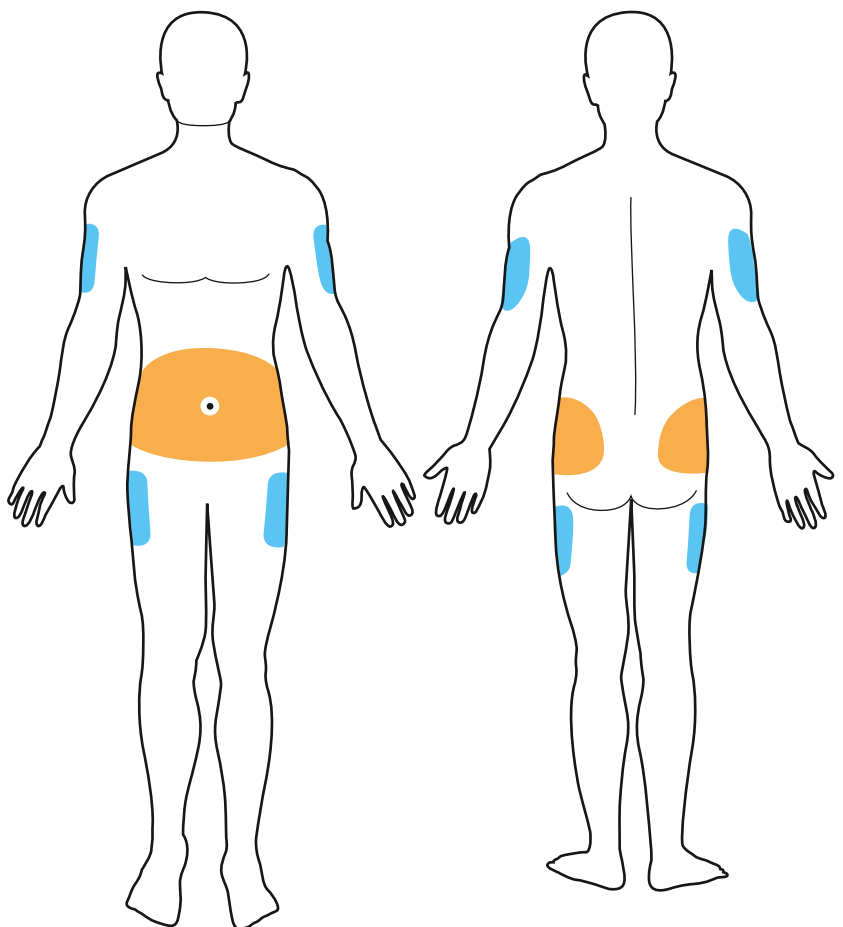
Different areas of your body absorb insulin at different rates. Your healthcare professional can help you select the best sites for your particular body type.

Shown below are some commonly recommended areas and their relative insulin absorption rates:

- **Abdomen** – considered the most efficient absorption area
- **Hips and buttocks** – slower absorption than in the abdomen but may be preferable for more active patients
- **Outer thigh** – slower absorption than the abdomen, however, rate may rise with physical activity. Interior thigh area should be avoided due to higher risk of irritation and infection
- **Back of the arms** – slower absorption than in the abdomen, however, rate may rise with physical activity

Avoid inserting your infusion set:

- Within a 5 cm (2 inch) radius of your belly button or glucose sensor site
- Where your body naturally bends a great deal
- In areas where clothing might cause irritation (for example, your belt line)
- Where you have scarred or hardened tissue or stretch marks



**Orange** Recommended infusion sites  
**Blue** Other possible infusion sites



**IMPORTANT:** Do not routinely change your set before bedtime, unless you are able to check your blood glucose (BG) 2-3 hours afterwards to ensure that the set is working properly.



# Section 4.1 | Changing the MiniMed® mio® Infusion Set with the MiniMed® 640G Insulin Pump



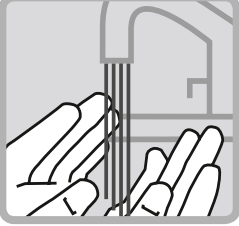

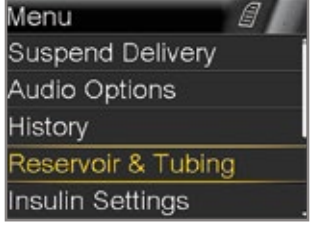



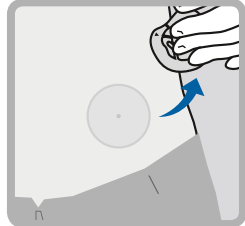
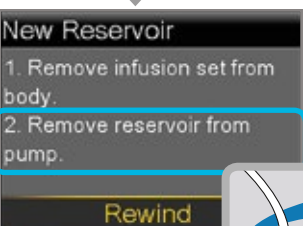


Before you begin, please note that it is not recommended that you change your infusion set just prior to bedtime.

Changing your set during the day may reduce the risk of unexplained highs and no delivery alarms while sleeping. Please refer to the MiniMed® mio® Infusion Set User Guide for more details.

To change your MiniMed® mio® infusion set, you will need to organise the following supplies:

				
Insulin cartridge/vial (at room temp for 1 hour)	Reservoir (with blue Transfer Guard)	MiniMed® mio® infusion set	Alcohol swabs/ skin antiseptics	Sharps bin

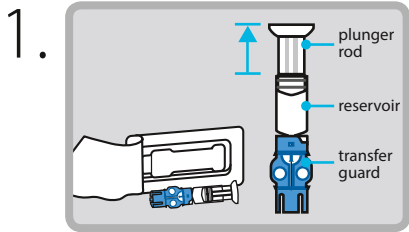
## START HERE:

1.  Wash your hands. Press .
2.  Select **Reservoir & Tubing**.
3.  Select **New Reservoir**.
4.    Remove the infusion set you have been using by loosening the adhesive and pulling away from body.
5.   Remove the used reservoir from the pump.
6.  Select **Rewind**.

*Continued on next page*

# Section 4.1 | Changing the MiniMed® mio® Infusion Set with the MiniMed® 640G Insulin Pump

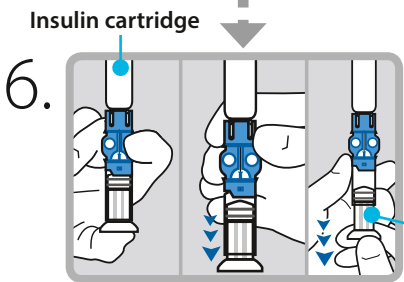
**FILL RESERVOIR & CONNECT TO THE INFUSION SET TUBING**  
 Follow the next steps to fill reservoir with insulin and connect to the infusion set tubing.



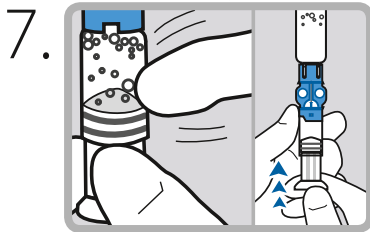
1. Remove from package. Make sure insulin vial is at room temperature to reduce the risk of air bubbles. (If using insulin cartridge proceed to step 6.)

**If using insulin vial only.**

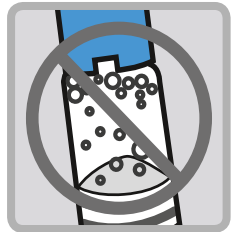
2. Pull plunger down to the amount that you plan to fill with insulin.



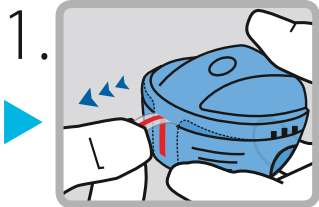
**If using a cartridge of insulin.**  
 Hold the reservoir upright. Push plunger into the reservoir to expel any air. Turn plunger slightly anti-clockwise to loosen it. Firmly press insulin cartridge onto blue transfer guard. Hold the reservoir and cartridge at eye level and using a pencil, push down on the rubber stopper of the cartridge to fill the reservoir.



7. Tap the reservoir to move air bubbles to top of reservoir. Push plunger up to move air into vial.



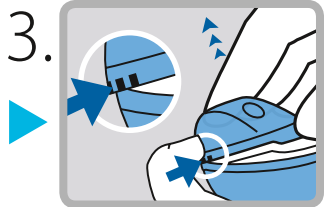
**CONNECT RESERVOIR TO INFUSION SET**  
 You will place the reservoir connector onto the end of the infusion set to the filled reservoir.



1. Remove the infusion set from packaging by pulling down the red plastic tab.

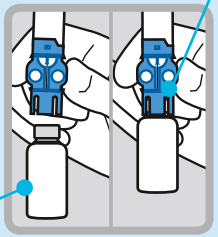


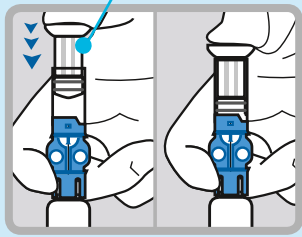
2. Then peel sterile paper from bottom.

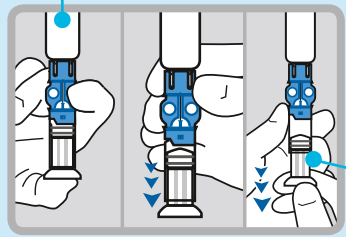


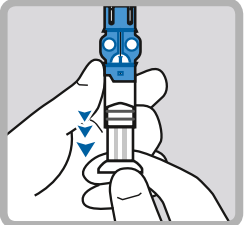
3. With one hand press the three raised markings on the sides of the lid.

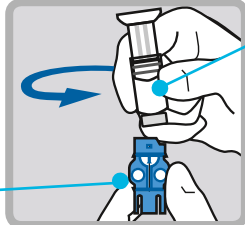
If using insulin cartridge, skip to Step 6.

3. **Transfer guard**  

 Wipe vial with alcohol. Place vial on table. Firmly press the blue transfer guard onto vial.

4. **Plunger**  

 Push and hold plunger down.

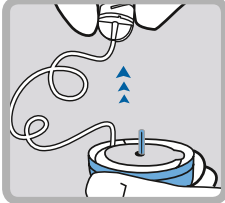
5. **Insulin vial**  

**Plunger**  
 With your thumb still on the plunger, flip over so vial is on top. Release thumb and pull plunger down to fill with insulin.

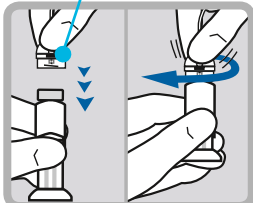
8. 
 If needed, pull plunger back down to amount of insulin needed for 2-3 days.

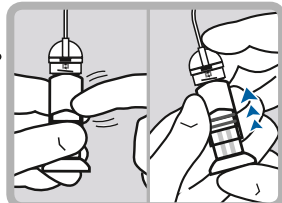
9. **Reservoir**  

**Transfer guard**  
 To avoid getting insulin on the top of the reservoir, turn vial over so it is upright. Hold transfer guard and turn reservoir counter-clockwise and remove from transfer guard.

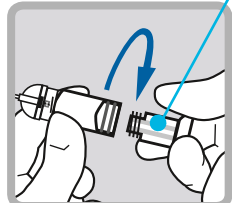


**IMPORTANT:** If insulin or any liquid gets inside the tubing connector, it can temporarily block the vents that allow the pump to properly fill the infusion set. This may result in the delivery of too little or too much insulin, which could cause hypoglycaemia or hyperglycaemia.

4. 
 Free tubing from slot. Gently unwind tubing in counter clockwise direction.

5. **Connector**  

 Gently push connector onto reservoir. Turn clockwise until locked. You will hear a click.

6. 
 If you see air bubbles, tap reservoir to move them to top. Push plunger just a bit to move them into tubing.

7. **Plunger**  

 Twist plunger counter-clockwise to loosen and remove.

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# Section 4.1 | Changing the MiniMed® mio® Infusion Set with the MiniMed® 640G Insulin Pump

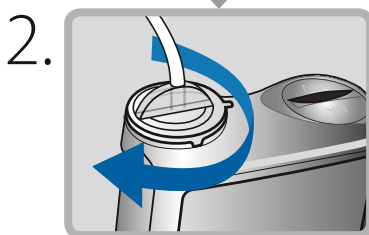
**THE BACKLIGHT MAY HAVE TURNED OFF**  
Press any button to turn the screen back on.



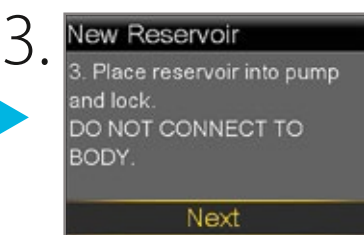
Select **Load Reservoir** and unlock pump if necessary.



Select **Next**.

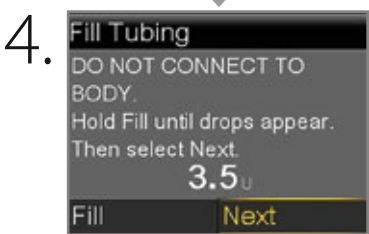


2. Turn clockwise until you feel reservoir lock into place.



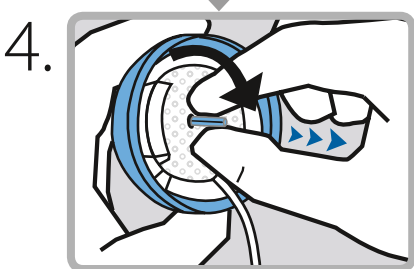
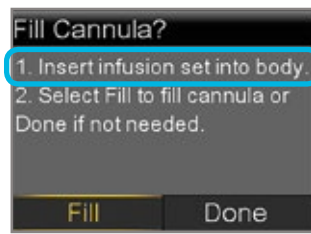
Select **Next**

**LOAD RESERVOIR AND FILL TUBING**  
Follow these steps to load the reservoir and fill the tubing.

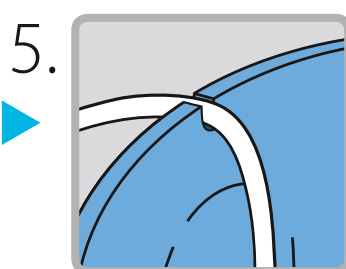


4. After you see drops, press and select **Next**.

**INSERT INFUSION SET**  
Next, follow the steps to insert the infusion set into your body.



4. Carefully hold needle guard by tip. To remove it, gently turn needle guard & pull away to expose needle.

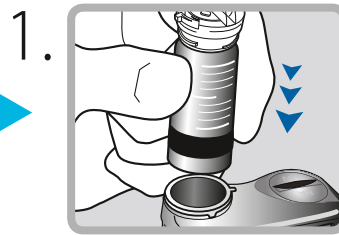


5. Place tubing in slot on side of inserter.

**CAUTION:**  
Be careful not to pull the tubing tightly when placing it in the slot.

### PLACE RESERVOIR INTO PUMP

Now place the filled reservoir into the reservoir compartment of the pump.



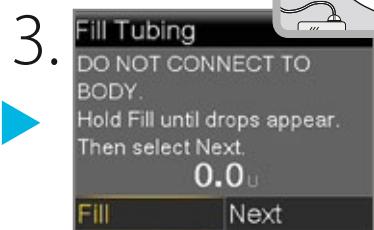
Place reservoir into pump.




1. Select **Load** and keep holding .

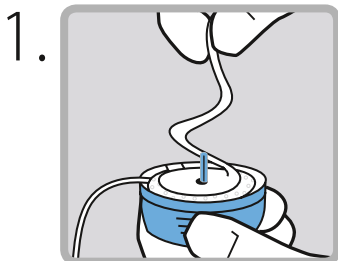
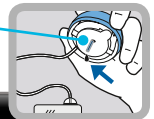


2. When you see this screen, select **Next**.

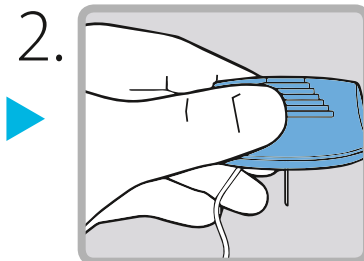


3. Select **Fill** and keep holding  until you see drops at the end of tubing, then let go.

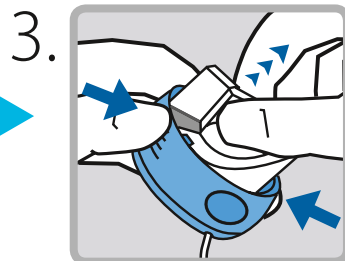
Drops at end of tubing



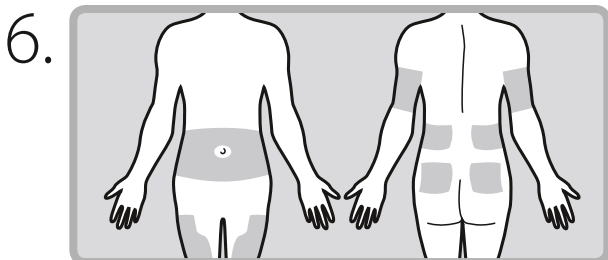
1. Gently peel paper to expose adhesive.



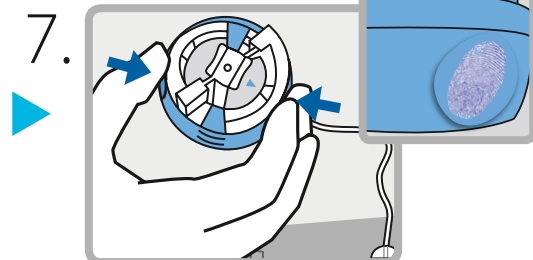
2. Turn over and hold by the lined ridges on the sides.



3. With other hand pull up on center of inserter until it clicks and locks into place.



6. Choose an insertion site from the shaded areas shown here. Wipe with alcohol or other antiseptic.



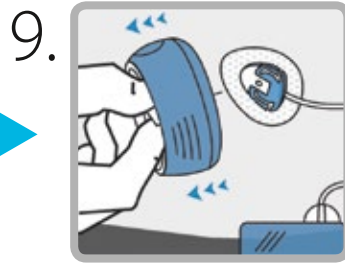
7. Place against prepared site on body. Press the round indentations on each side of inserter to insert needle.

Continued on next page

# Section 4.1 | Changing the MiniMed® mio® Infusion Set with the MiniMed® 640G Insulin Pump



8. Push down on center of serter to press adhesive against skin.

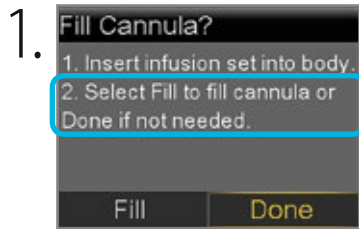


9. To remove serter, hold the center handle and gently pull it straight out away from body. Press adhesive securely against skin.



10. Place lid back onto serter to safely discard needle.

**FILL CANNULA**  
You will now fill the cannula, the little tube under your skin, with insulin.



1. Select **Fill**.



2. Select **Fill amount** and enter:  
- 0.300 if using 6 mm cannula  
- 0.500 if using 9 mm cannula  
Then press **⊙**.



**Note:** Your pump will remember the **Fill amount** that you used last. Always verify that the Fill amount is correct.

- If it is correct, press **✓** to **Fill Now** and press **⊙**.
- If it is incorrect, press **⊙**. Change to correct amount and. Press **⊙**. **⊙** **Fill Now**.



3. Select **Fill Now**.



4. The Home screen displays the insulin as it fills the cannula.



**Note:** Select **Stop Filling** if you need to stop, for example, if you notice the **Total** amount is incorrect. This should rarely happen if you have verified the **Fill amount** on the previous screen.

**Your infusion set change is now complete!**

## Section 4.2 | Changing the MiniMed® Silhouette™ Infusion Set with the MiniMed® 640G Insulin Pump



Before you begin, please note that it is not recommended that you change your infusion set just prior to bedtime.

Changing your set during the day may reduce the risk of unexplained highs and no delivery alarms while sleeping. Please refer to the MiniMed® Silhouette™ Infusion Set User Guide for more details.

To change your MiniMed® Silhouette™ infusion set (Sil-set), you will need to organise the following supplies:



Insulin cartridge/vial  
(at room temp  
for 1 hour)

Reservoir  
(with blue  
Transfer Guard)

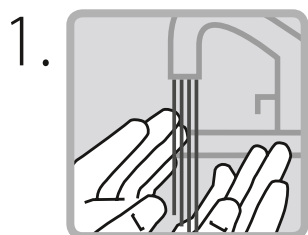
MiniMed®  
Sil-serter™ inserter  
(optional)


MiniMed®  
Silhouette™  
infusion set

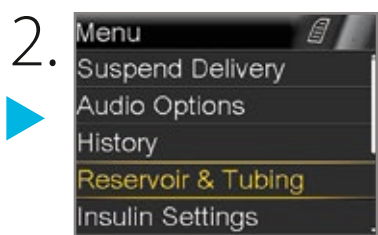
Alcohol swabs/  
skin antiseptics

Sharps bin

### START HERE:



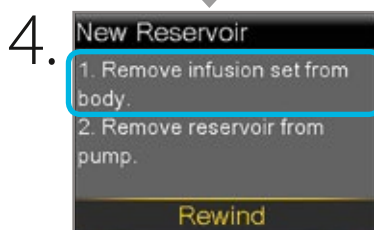
1. Wash your hands.  
Press .



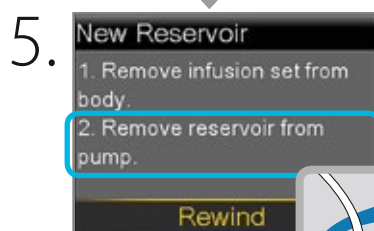
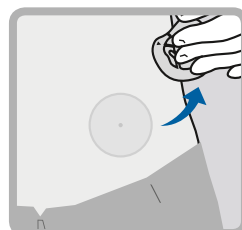
2. Select **Reservoir & Tubing**.



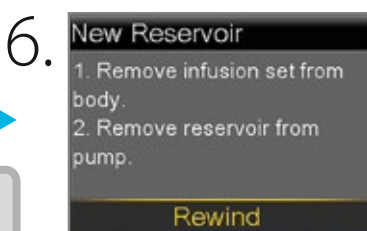
3. Select **New Reservoir**.



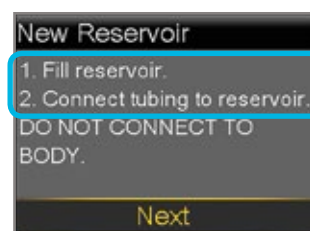
4. Remove the infusion set you have been using by loosening the adhesive and pulling away from body.



5. Remove the used reservoir from the pump.



6. Select **Rewind**.



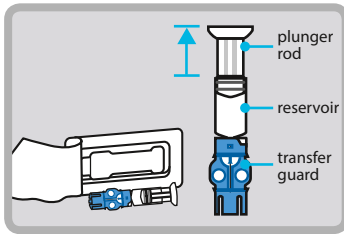
Continued on next page

# Section 4.2 | Changing the MiniMed® Silhouette™ Infusion Set with the MiniMed® 640G Insulin Pump

## FILL RESERVOIR & CONNECT TO THE INFUSION SET TUBING

Follow the next steps to fill reservoir with insulin and connect to the infusion set tubing.

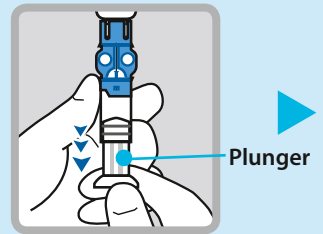
1.



Remove from package. Make sure insulin vial is at room temperature to reduce the risk of air bubbles. (If using insulin cartridge proceed to step 6.)

If using insulin vial only.

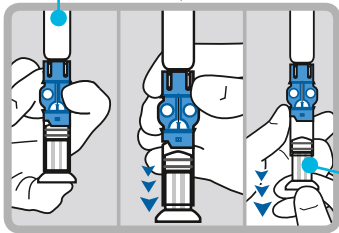
2.



Pull plunger down to the amount that you plan to fill with insulin.

Insulin cartridge

6.

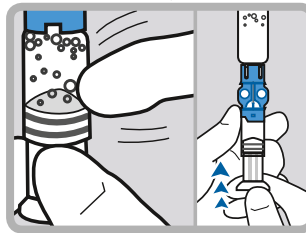


Plunger

**If using a cartridge of insulin.**

Hold the reservoir upright. Push plunger into the reservoir to expel any air. Turn plunger slightly anti-clockwise to loosen it. Firmly press insulin cartridge onto blue transfer guard. Hold the reservoir and cartridge at eye level and using a pencil, push down on the rubber stopper of the cartridge to fill the reservoir.

7.



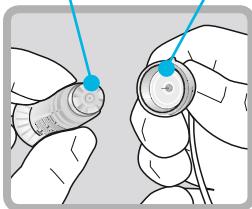
Tap the reservoir to move air bubbles to top of reservoir. Push plunger up to move air into vial.

## CONNECT RESERVOIR TO INFUSION SET

You will place the reservoir connector onto the end of the infusion set to the filled reservoir.

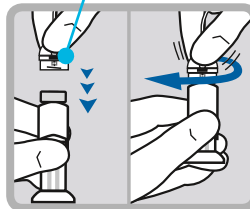
Top of Reservoir    Tubing Connector

1.



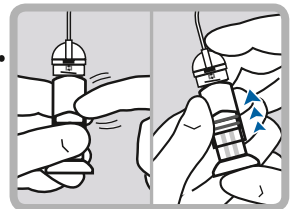
Open infusion set packaging and connect the infusion set to the newly filled reservoir. Make sure both the top of the reservoir and the connector are dry before connecting them. Liquid can temporarily block the vents on the tubing connector.

2.



Gently push connector onto reservoir. Turn clockwise until locked. You will hear a click.

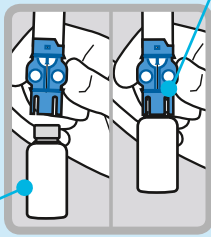
3.

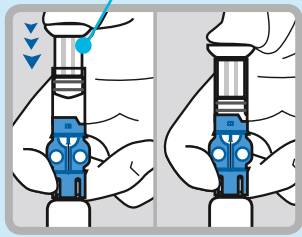


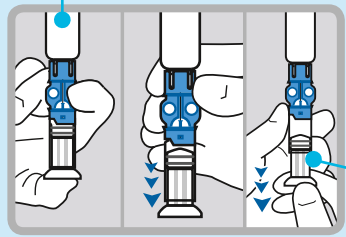
If you see air bubbles, tap reservoir to move them to top. Push plunger just a bit to move them into tubing.

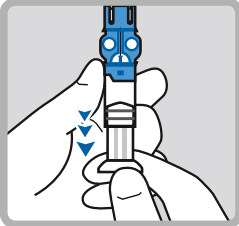


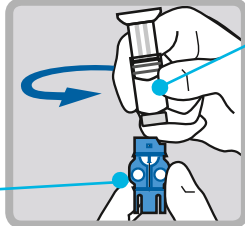
If using insulin cartridge, skip to Step 6.

3. **Transfer guard**  

**Insulin vial**  
 Wipe vial with alcohol. Place vial on table. Firmly press the blue transfer guard onto vial.

4. **Plunger**  

 Push and hold plunger down.

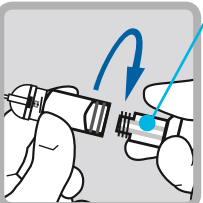
5. **Insulin vial**  

**Plunger**  
 With your thumb still on the plunger, flip over so vial is on top. Release thumb and pull plunger down to fill with insulin.

8. 
 If needed, pull plunger back down to amount of insulin needed for 2-3 days.

9. **Reservoir**  

**Transfer guard**  
 To avoid getting insulin on the top of the reservoir, turn vial over so it is upright. Hold transfer guard and turn reservoir counter-clockwise and remove from transfer guard.



**IMPORTANT:** If insulin or any liquid gets inside the tubing connector, it can temporarily block the vents that allow the pump to properly fill the infusion set. This may result in the delivery of too little or too much insulin, which could cause hypoglycaemia or hyperglycaemia.

4. **Plunger**  


Twist plunger counter-clockwise to loosen and remove.

**THE BACKLIGHT MAY HAVE TURNED OFF**

Press any button to turn the screen back on.



Select **Load Reservoir** and unlock pump if necessary.



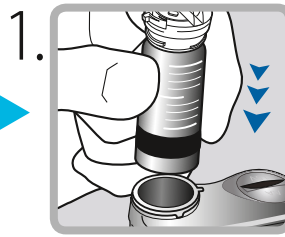
Select **Next**.

*Continued on next page*

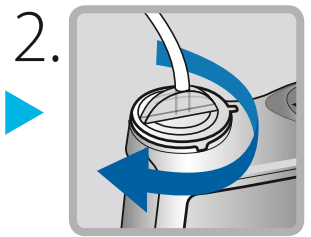
# Section 4.2 | Changing the MiniMed® Silhouette™ Infusion Set with the MiniMed® 640G Insulin Pump

## PLACE RESERVOIR INTO PUMP

Now place the filled reservoir into the reservoir compartment of the pump.



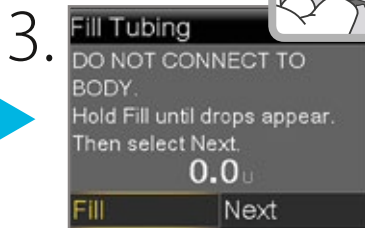
1. Place reservoir into pump.




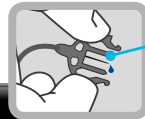
2. Turn clockwise until you feel reservoir lock into place.



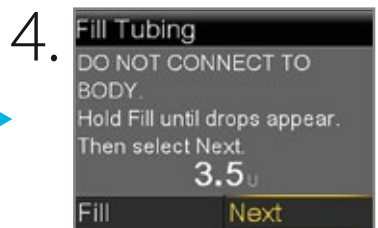
2. When you see this screen, select **Next**.




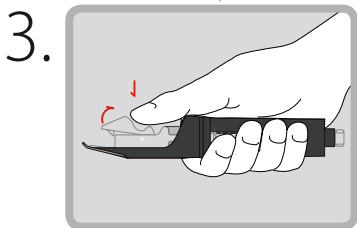
3. Select **Fill** and keep holding  until you see drops at the end of tubing, then let go.



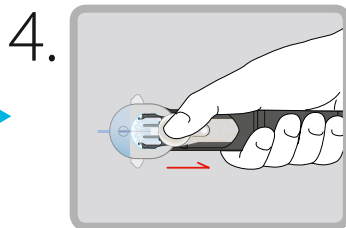
Drops at end of tubing



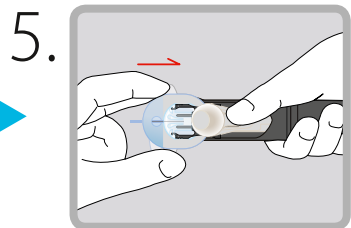
4. After you see drops, press  and select **Next**.



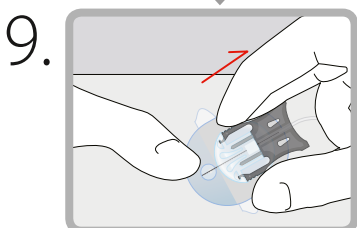
3. Check that Sil-serter inserter is not pre-loaded. Ensure white release button is locked. Open mouth of inserter by depressing the white lever (release button) with your thumb.



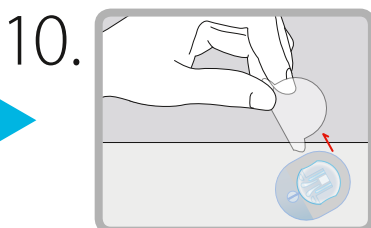
4. Slide Sil-set cannula onto carrier under the teeth of the release button. Remove thumb from the white lever.



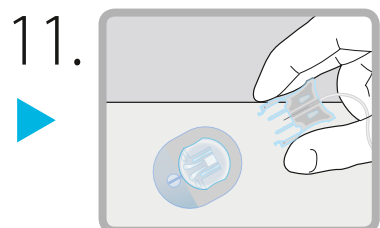
5. Remove blue needle guard. Slide back carrier by pushing on white lever until the inserter 'clicks' into place. Unlock the release button.



9. Hold cannula down with one hand. Gently press side clips of the introducer needle in whilst pulling it out. Dispose of needle in sharps bin. Check needle for any blood. (Change set if required.)



10. Peel the back tab of tape and smooth down. Smooth down the adhesive.



11. Connect tubing to the cannula.



Select **Next**

**LOAD RESERVOIR AND FILL TUBING**

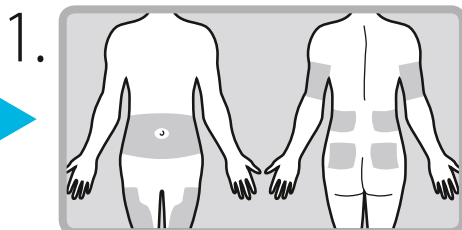
Follow these steps to load the reservoir and fill the tubing.



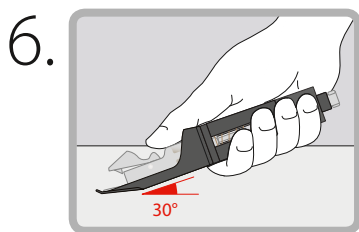
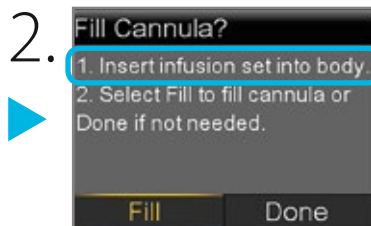
Select **Load** and keep holding .

**INSERT INFUSION SET WITH A SIL-SERTER™ INSERTER**

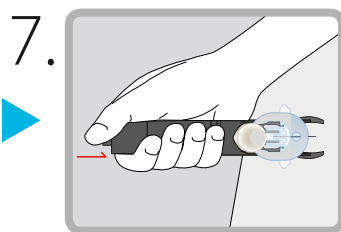
Next, follow the steps to insert the infusion set into your body.



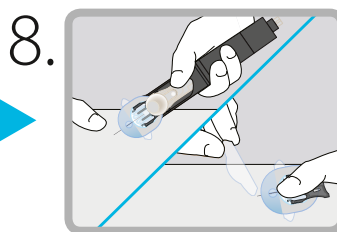
Choose an insertion site from the shaded areas shown here. Wipe with alcohol or antiseptic.



Position the loaded inserter over chosen site at a 30 degree angle, so that tubing of Sil-set will lead horizontally and towards the sides of the body.



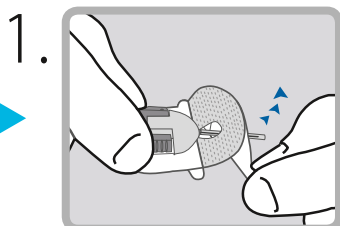
Push white release button down to insert the Sil-set cannula.



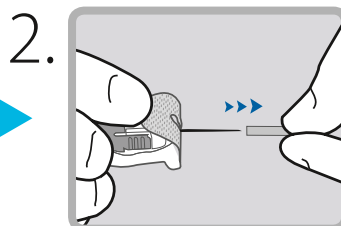
Holding down the sides of the cannula adhesive with one hand, release the cannula from the inserter by depressing the white lever. Slide inserter across skin, away from set. Remove front tape and smooth down adhesive.

**INSERT INFUSION SET WITHOUT AN INSERTER**

Next, follow the steps to insert the infusion set into your body.



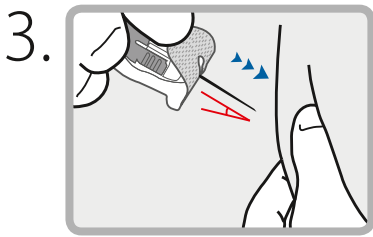
Remove front tape from the infusion set.



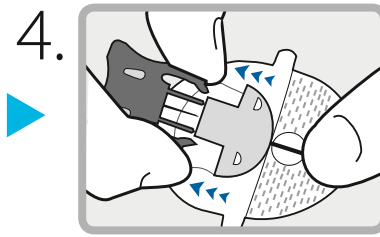
Remove the blue needle guard from the cannula.

*Continued on next page*

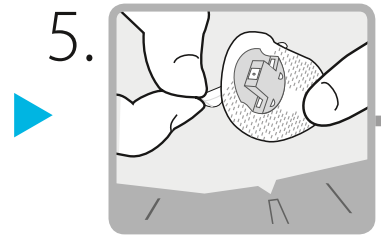
# Section 4.2 | Changing the MiniMed® Silhouette™ Infusion Set with the MiniMed® 640G Insulin Pump



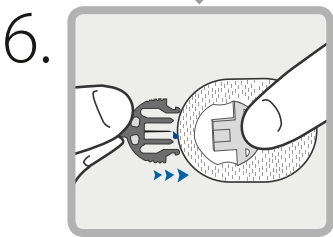
3. Insert cannula using a 30 degree angle. Smooth down adhesive to secure set in place.



4. Hold cannula down with one finger on the front adhesive. Use thumb and index finger to gently press side clips of the introducer needle inwards whilst pulling it out. Dispose introducer needle in sharps bin. Check needle for any blood. (Change set if required.)

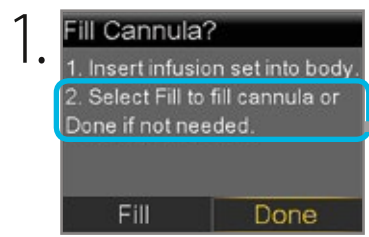


5. Peel off other adhesive backing. Smooth down the adhesive.



6. Connect tubing to the cannula.

**FILL CANNULA**  
You will now fill the cannula, the little tube under your skin, with insulin.



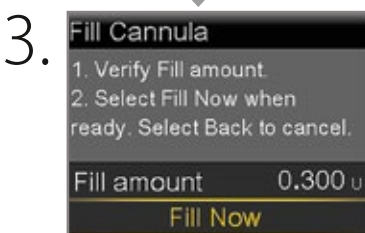
Select **Fill**.



Select **Fill amount** and enter:  
- 0.300 if using 6 mm cannula  
- 0.500 if using 9 mm cannula  
Then press **Done**.

**Note:** Your pump will remember the **Fill amount** that you used last. Always verify that the Fill amount is correct.

- If it is correct, press **Done** to **Fill Now** and press **Done**.
- If it is incorrect, press **Done**. Change to correct amount and. Press **Done**. **Fill Now**.



Select **Fill Now**.



The Home screen displays the insulin as it fills the cannula.

**Note:** Select **Stop Filling** if you need to stop, for example, if you notice the **Total** amount is incorrect. This should rarely happen if you have verified the **Fill amount** on the previous screen.

**Your infusion set change is now complete!**

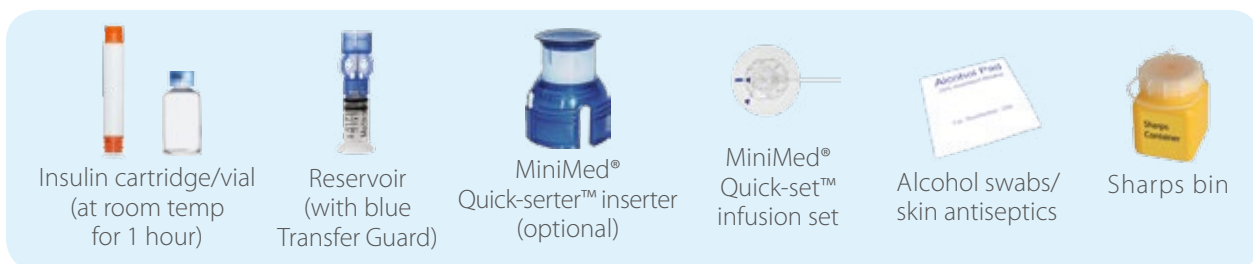
## Section 4.3 | Changing the MiniMed® Quick-set™ Infusion Set with the MiniMed® 640G Insulin Pump



Before you begin, please note that it is not recommended that you change your infusion set just prior to bedtime.

Changing your set during the day may reduce the risk of unexplained highs and no delivery alarms while sleeping. Please refer to the MiniMed® Quick-set™ Infusion Set User Guide for more details.

To change your MiniMed® Quick-set™ infusion set, you will need to organise the following supplies:



Insulin cartridge/vial  
(at room temp  
for 1 hour)

Reservoir  
(with blue  
Transfer Guard)

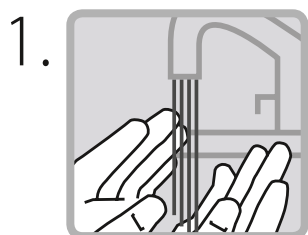
MiniMed®  
Quick-setter™ inserter  
(optional)


MiniMed®  
Quick-set™  
infusion set

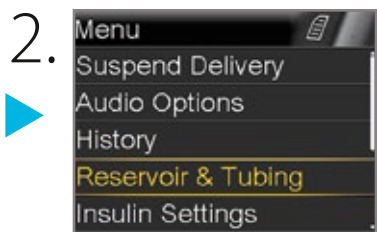
Alcohol swabs/  
skin antiseptics

Sharps bin

### START HERE:



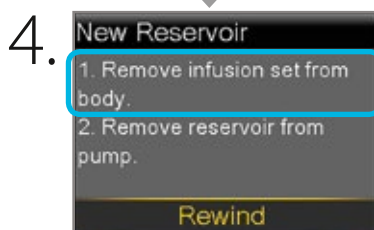
1. Wash your hands.  
Press .



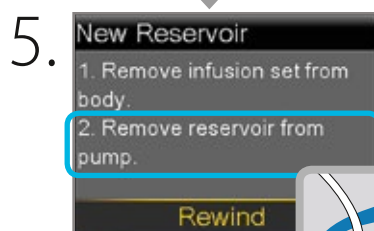
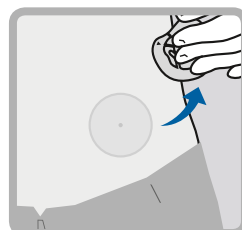
2. Select **Reservoir & Tubing**.



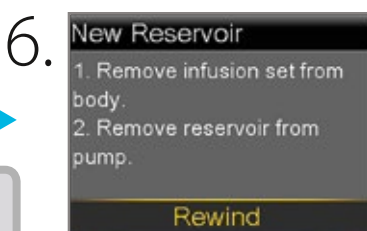
3. Select **New Reservoir**.



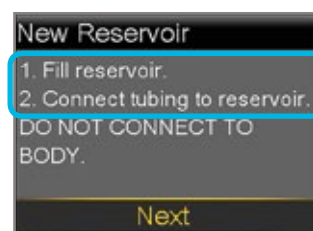
4. Remove the infusion set you have been using by loosening the adhesive and pulling away from body.



5. Remove the used reservoir from the pump.



6. Select **Rewind**.



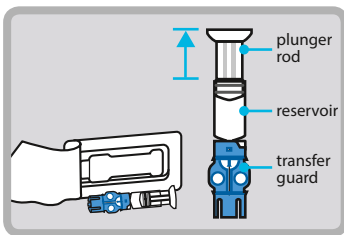
Continued on next page

# Section 4.3 | Changing the MiniMed® Quick-set™ Infusion Set with the MiniMed® 640G Insulin Pump

## FILL RESERVOIR & CONNECT TO THE INFUSION SET TUBING

Follow the next steps to fill reservoir with insulin and connect to the infusion set tubing.

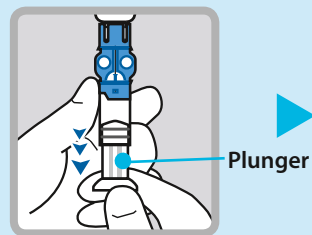
1.



Remove from package. Make sure insulin vial is at room temperature to reduce the risk of air bubbles. (If using insulin cartridge proceed to step 6.)

If using insulin vial only.

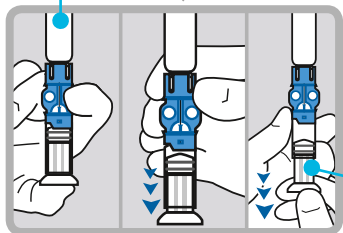
2.



Pull plunger down to the amount that you plan to fill with insulin.

Insulin cartridge

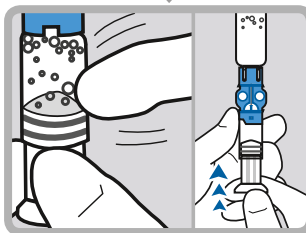
6.



**If using a cartridge of insulin.**

Hold the reservoir upright. Push plunger into the reservoir to expel any air. Turn plunger slightly anti-clockwise to loosen it. Firmly press insulin cartridge onto blue transfer guard. Hold the reservoir and cartridge at eye level and using a pencil, push down on the rubber stopper of the cartridge to fill the reservoir.

7.



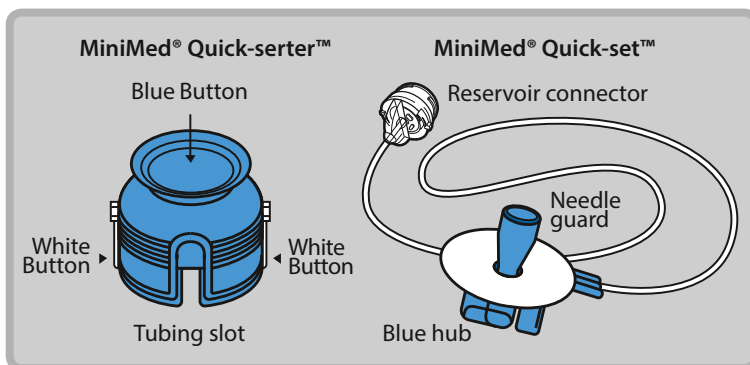
Tap the reservoir to move air bubbles to top of reservoir. Push plunger up to move air into vial.



## CONNECT RESERVOIR TO INFUSION SET

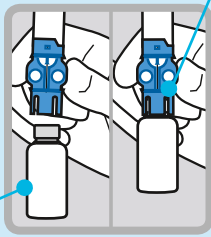
You will place the reservoir connector onto the end of the infusion set to the filled reservoir.

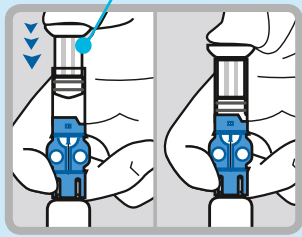
1.

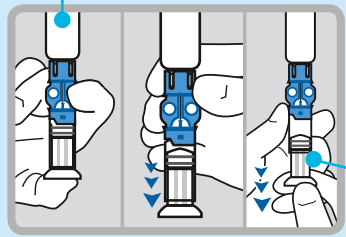


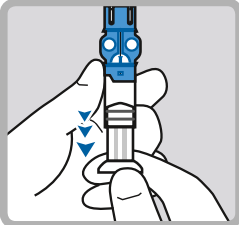
Remove infusion set from package. Remove the paper that holds the tubing together.

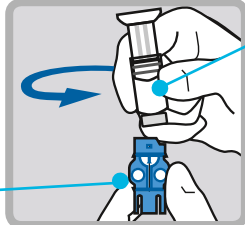
If using insulin cartridge, skip to Step 6.

3. **Transfer guard**  

**Insulin vial**  
 Wipe vial with alcohol. Place vial on table. Firmly press the blue transfer guard onto vial.

4. **Plunger**  

 Push and hold plunger down.

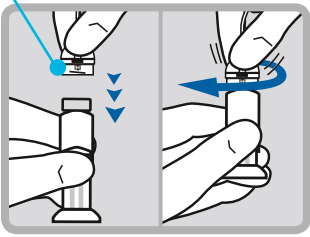
5. **Insulin vial**  

**Plunger**  
 With your thumb still on the plunger, flip over so vial is on top. Release thumb and pull plunger down to fill with insulin.

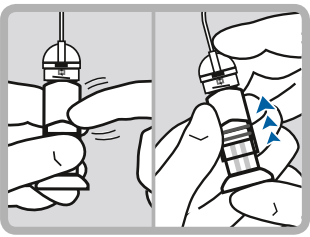
8. 
 If needed, pull plunger back down to amount of insulin needed for 2-3 days.

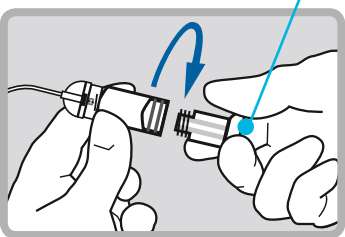
9. **Reservoir**  

**Transfer guard**  
 To avoid getting insulin on the top of the reservoir, turn vial over so it is upright. Hold transfer guard and turn reservoir counter-clockwise and remove from transfer guard.



**IMPORTANT:** If insulin or any liquid gets inside the tubing connector, it can temporarily block the vents that allow the pump to properly fill the infusion set. This may result in the delivery of too little or too much insulin, which could cause hypoglycaemia or hyperglycaemia.

2. **Connector**  

 Gently push connector onto reservoir. Turn clockwise until locked. You will hear a click.

3. 
 If you see air bubbles, tap reservoir to move them to top. Push plunger just a bit to move them into tubing.

4. **Plunger**  

 Twist plunger counter-clockwise to loosen and remove.

Continued on next page

# Section 4.3 | Changing the MiniMed® Quick-set™ Infusion Set with the MiniMed® 640G Insulin Pump

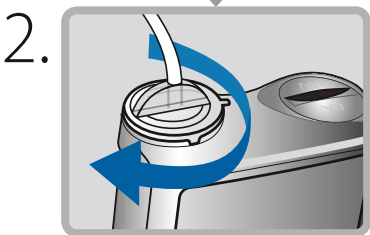
**THE BACKLIGHT MAY HAVE TURNED OFF**  
Press any button to turn the screen back on.



Select **Load Reservoir** and unlock pump if necessary.



Select **Next**.

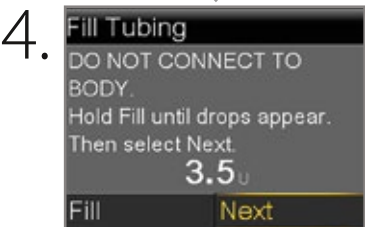


2. Turn clockwise until you feel reservoir lock into place.



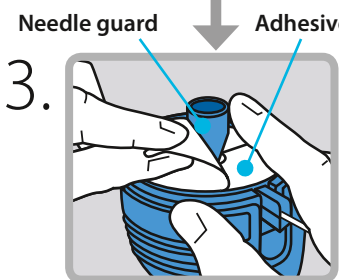
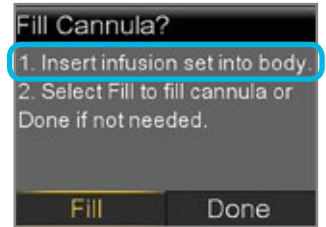
3. Select **Next**

**LOAD RESERVOIR AND FILL TUBING**  
Follow these steps to load the reservoir and fill the tubing.

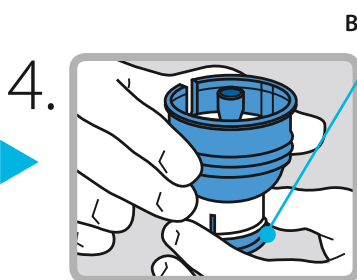


4. After you see drops, press and select **Next**.

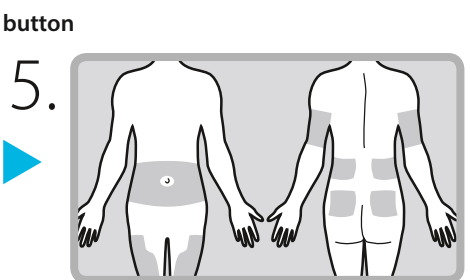
**INSERT INFUSION SET**  
Next, follow the steps to insert the infusion set into your body.



3. Holding needle guard, pull off the paper that covers the adhesive.



4. Pull blue button down until you hear it click.

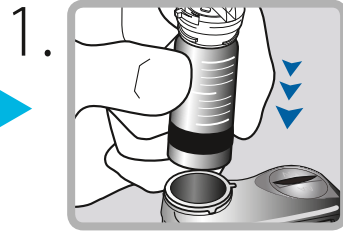


5. Choose an insertion site from the shaded areas shown here. Wipe with alcohol or antiseptic.



### PLACE RESERVOIR INTO PUMP

Now place the filled reservoir into the reservoir compartment of the pump.



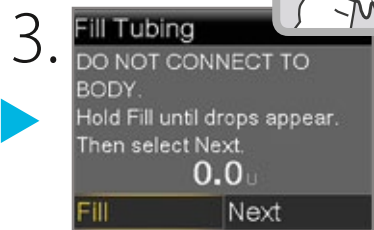
Place reservoir into pump.




1. Select **Load** and keep holding .

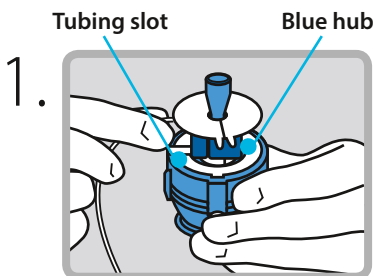
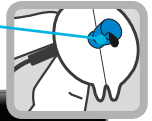


2. When you see this screen, select **Next**.

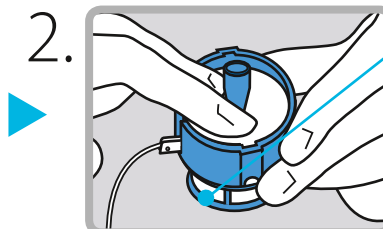


3. Select **Fill** and keep holding  until you see drops at the end of tubing, then let go.

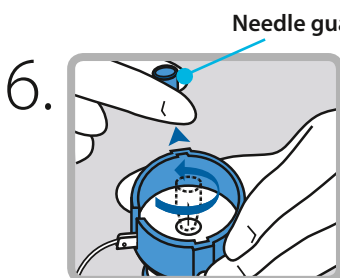
Drops at end of tubing



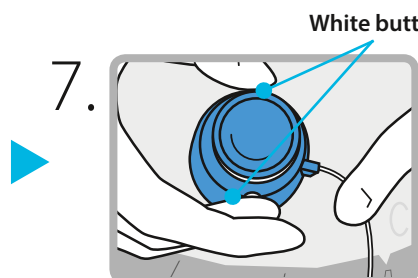
1. Place blue hub into quick-serter, placing the handle in the tubing slot.



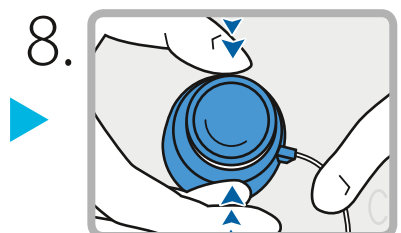
2. Holding the serter with one hand, gently press infusion set to secure. Be careful not to push all the way into serter. Do not hold or press on the blue button.



6. Turn to loosen needle guard and pull.



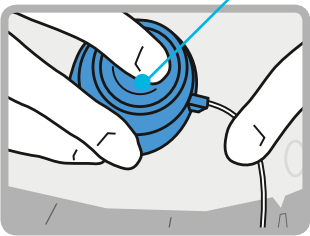
7. Hold serter against cleaned site.

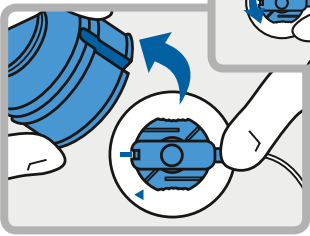


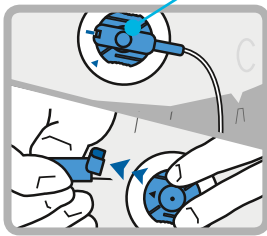
8. Press the two white buttons at the same time.

*Continued on next page*

# Section 4.3 | Changing the MiniMed® Quick-set™ Infusion Set with the MiniMed® 640G Insulin Pump

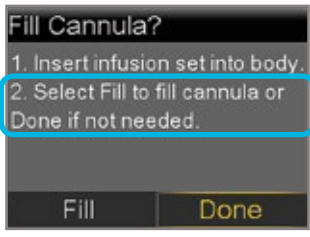
9.  Press the blue button to release the infusion set from the serter.

10.  Pull serter away from body. Press adhesive against skin.


11.  Hold infusion set. Pull blue handle straight out to remove needle.

12.  Fold blue handle until locked. Dispose the needle in a sharps container.






**FILL CANNULA**  
You will now fill the cannula, the little tube under your skin, with insulin.

1.  Select **Fill**.

2. 

Select **Fill amount** and enter:  
- 0.300 if using 6 mm cannula  
- 0.500 if using 9 mm cannula  
Then press .

**Note:** Your pump will remember the **Fill amount** that you used last. Always verify that the Fill amount is correct.

- If it is correct, press  to **Fill Now** and press .
- If it is incorrect, press . Change to correct amount and. Press   **Fill Now**.

3. 

Select **Fill Now**.

4. 

The Home screen displays the insulin as it fills the cannula.

**Note:** Select **Stop Filling** if you need to stop, for example, if you notice the **Total** amount is incorrect. This should rarely happen if you have verified the **Fill amount** on the previous screen.

**Your infusion set change is now complete!**

# Section 4.4 | Changing the MiniMed® Sure-T® Infusion Set with the MiniMed® 640G Insulin Pump



Before you begin, please note that it is not recommended that you change your infusion set just prior to bedtime.

Changing your set during the day may reduce the risk of unexplained highs and no delivery alarms while sleeping. Please refer to the MiniMed® Sure-T® Infusion Set User Guide for more details.

To change your MiniMed® Sure-T® infusion set, you will need to organise the following supplies:

Insulin cartridge/vial (at room temp for 1 hour)	Reservoir (with blue Transfer Guard)	MiniMed® Sure-T® infusion set	Alcohol swabs/ skin antiseptics	Sharps bin

## START HERE:

1. Wash your hands. Press .
2. Select **Reservoir & Tubing**.
3. Select **New Reservoir**.
4. Remove the infusion set you have been using by loosening the adhesive and pulling away from body.
5. Remove the used reservoir from the pump.
6. Select **Rewind**.

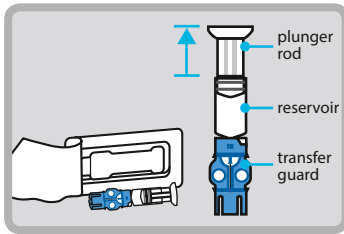
*Continued on next page*

# Section 4.4 | Changing the MiniMed® Sure-T® Infusion Set with the MiniMed® 640G Insulin Pump

## FILL RESERVOIR & CONNECT TO THE INFUSION SET TUBING

Follow the next steps to fill reservoir with insulin and connect to the infusion set tubing.

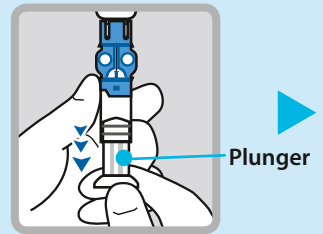
1.



Remove from package. Make sure insulin vial is at room temperature to reduce the risk of air bubbles. (If using insulin cartridge proceed to step 6.)

If using insulin vial only.

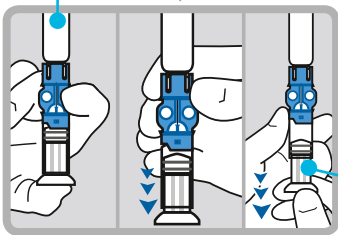
2.



Pull plunger down to the amount that you plan to fill with insulin.

Insulin cartridge

6.

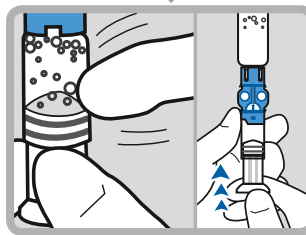


Plunger

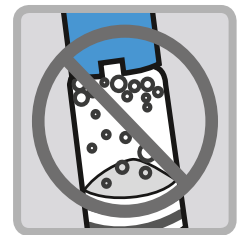
### If using a cartridge of insulin.

Hold the reservoir upright. Push plunger into the reservoir to expel any air. Turn plunger slightly anti-clockwise to loosen it. Firmly press insulin cartridge onto blue transfer guard. Hold the reservoir and cartridge at eye level and using a pencil, push down on the rubber stopper of the cartridge to fill the reservoir.

7.



Tap the reservoir to move air bubbles to top of reservoir. Push plunger up to move air into vial.



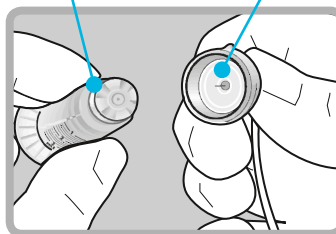
## CONNECT RESERVOIR TO INFUSION SET

You will place the reservoir connector onto the end of the infusion set to the filled reservoir.

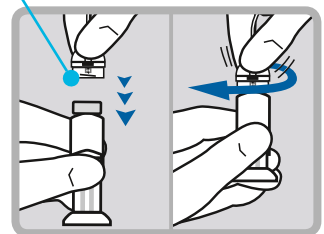
Top of Reservoir

Tubing Connector

Connector



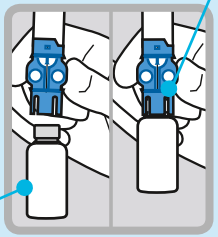
2.

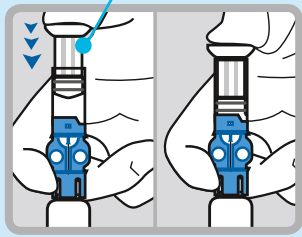


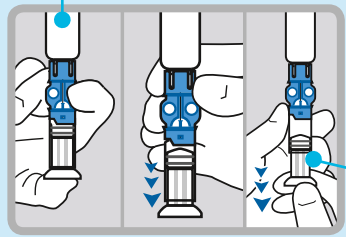
Open infusion set packaging and connect the infusion set to the newly filled reservoir. Make sure both the top of the reservoir and the connector are dry before connecting them. Liquid can temporarily block the vents on the tubing connector.

Gently push connector onto reservoir. Turn clockwise until locked. You will hear a click.

If using insulin cartridge, skip to Step 6.

3. **Transfer guard**  

Insulin vial

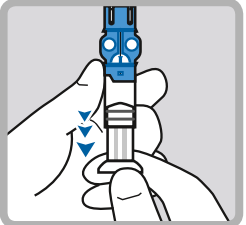
4. **Plunger**  


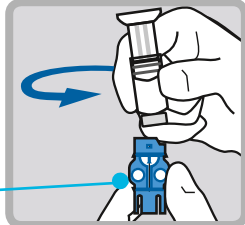
5. **Insulin vial**  

Plunger

Wipe vial with alcohol. Place vial on table. Firmly press the blue transfer guard onto vial.

Push and hold plunger down.

With your thumb still on the plunger, flip over so vial is on top. Release thumb and pull plunger down to fill with insulin.

8. 

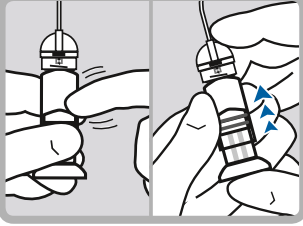
9. 
Reservoir  
Transfer guard

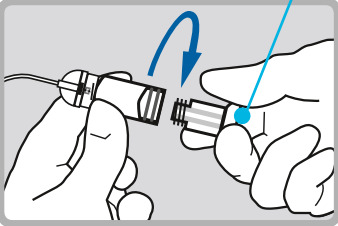
If needed, pull plunger back down to amount of insulin needed for 2-3 days.

To avoid getting insulin on the top of the reservoir, turn vial over so it is upright. Hold transfer guard and turn reservoir counter-clockwise and remove from transfer guard.



**IMPORTANT:** If insulin or any liquid gets inside the tubing connector, it can temporarily block the vents that allow the pump to properly fill the infusion set. This may result in the delivery of too little or too much insulin, which could cause hypoglycaemia or hyperglycaemia.

3. 

4. 
Plunger

If you see air bubbles, tap reservoir to move them to top. Push plunger just a bit to move them into tubing.

Twist plunger counter-clockwise to loosen and remove.

Continued on next page

# Section 4.4 | Changing the MiniMed® Sure-T® Infusion Set with the MiniMed® 640G Insulin Pump

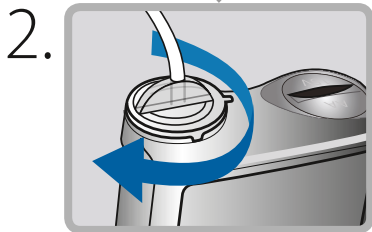
**THE BACKLIGHT MAY HAVE TURNED OFF**  
Press any button to turn the screen back on.



Select **Load Reservoir** and unlock pump if necessary.



Select **Next**.

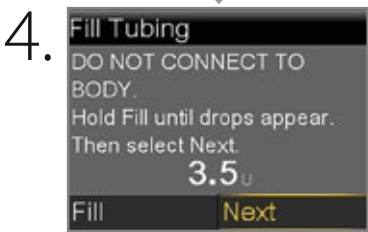


2. Turn clockwise until you feel reservoir lock into place.



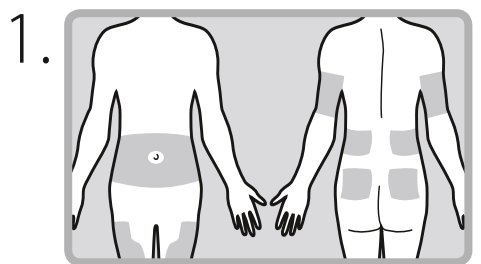
3. Select **Next**

**LOAD RESERVOIR AND FILL TUBING**  
Follow these steps to load the reservoir and fill the tubing.

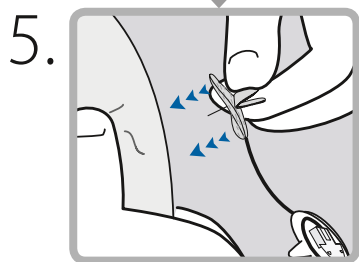


4. After you see drops, press and select **Next**.

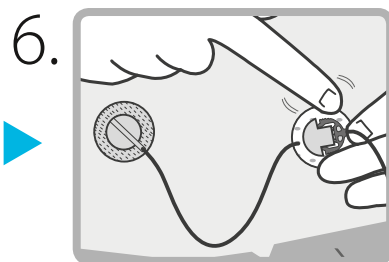
**INSERT INFUSION SET**  
Next, follow the steps to insert the infusion set into your body.



1. Choose an insertion site from the shaded areas shown here. Wipe with alcohol or antiseptic.



5. Insert infusion set using a 90 degree angle. Smooth down adhesive to secure set in place.



6. Remove backing from adhesive at the tubing connection site. Place in a convenient location near insertion site. Ensure tubing between the two sites is not tight.

### PLACE RESERVOIR INTO PUMP

Now place the filled reservoir into the reservoir compartment of the pump.



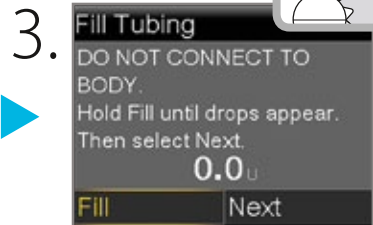
Place reservoir into pump.




Select **Load** and keep holding .

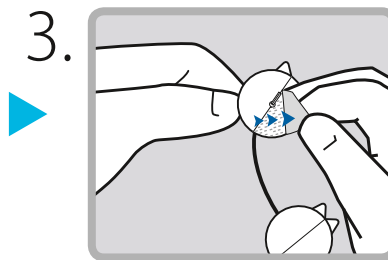
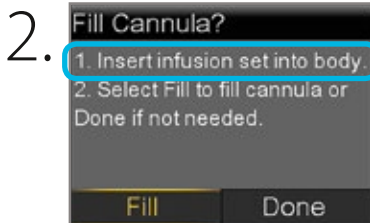


When you see this screen, select **Next**.

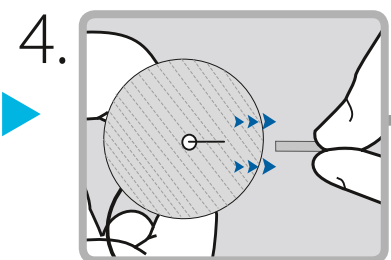


Select **Fill** and keep holding  until you see drops at the end of tubing, then let go.

Drops at end of tubing



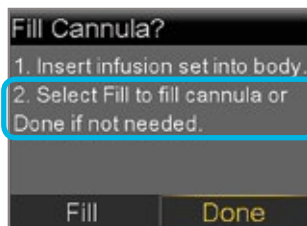
Remove backing from the adhesive surrounding the needle.



Remove needle guard.

### FILL CANNULA

When using a Sure-T Infusion Set you are not required to fill the cannula. Please select "Done".



Select **Done**.

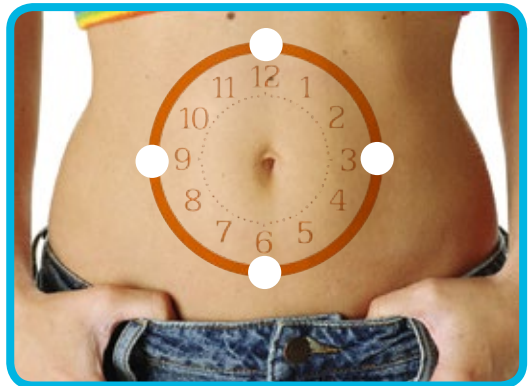
Your infusion set change is now complete!

## 5.1 Infusion Site Management

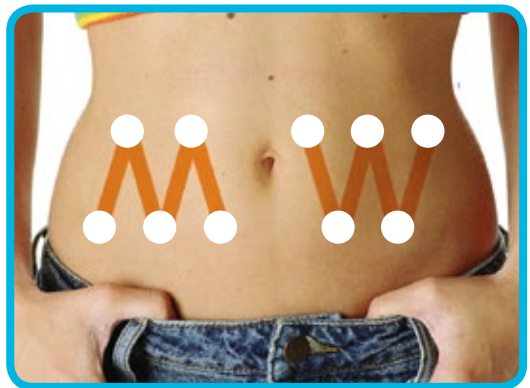
### 5.1.1 Rotating Your Sites

- Rotate infusion set (and sensor) sites to keep your tissue healthy.
- Lumps or hardened areas are called “hypertrophy” caused by injecting insulin into the same site over time.
- If you have lumpy or hard areas choose a softer site and avoid the previous site for about one month or you may experience poor insulin absorption. You may also talk to your healthcare professional to discuss possible alternative site locations.
- Switching your infusion set to alternative sites (e.g. if you normally use your abdomen and change to using your arms or legs) may result in changes to your glucose control. This is likely to be due to the speed of insulin absorption, so you may need to check your BG more frequently.

These pictures may be helpful to assist you in rotating your sites in an organised way. If you wear your site in an area other than your belly (such as leg, arm, or buttocks) you should use a variation of these methods.



Visualise an imaginary clock drawn on your abdomen surrounding your belly button. Rotate infusion sites by starting at the 12 o'clock position and then rotating the site clockwise to 3 o'clock, 6 o'clock, and so on.



Imagine an “M” or “W” pattern approximately 10cm long on either side of your belly button. Start at the end of one letter and proceed through the letter, rotating the infusion set at each intersection.

### 5.1.2 Replace Infusion Set and Reservoir Every 2 to 3 Days

The US Centers for Disease Control and Prevention (CDC) encourages patients to change their infusion sites and tubing every 48–72 hours.<sup>2</sup> Frequent changing of infusion sites can help prevent:

- Cutaneous (skin) complications<sup>1,3,4</sup>
- Loss of glycaemic control<sup>1</sup>
- Lipohypertrophy (fatty tissue build-up)<sup>4,5</sup>

Medtronic infusion sets contain state-of-the-art adhesive materials. However, your body can react to adhesives differently throughout the year based on your diet, the climate and other factors.

In addition, insulin loses its strength over time<sup>6</sup>, especially with heat and agitation. As this happens, insulin becomes less effective, and controlling your blood glucose becomes more difficult. Therefore, it is critical to change your insulin reservoir every 2 to 3 days as well.

#### Simple steps for preventing infection

Besides changing infusion sets and sites every 2 to 3 days, avoid using your infusion sets with broken seals or expired “use by” dates.

Other precautions:

- Wash your hands prior to handling sets
- Thoroughly prepare site
- Check the whole infusion set for leakage
- Verify proper insertion
- Avoid touching or breathing on the needle or cannula



**Use it right and use it in good health.  
Change your infusion set every 2 to 3 days.**



### 6.1 Tips for Securing Your Site

- Keep the site clean-shaven.
- Try removing dead surface skin cells with a facial scrub brush, loofah or a washcloth with soap and water.
- Use a prep or additional adhesive underneath or around your site for extra protection by following the tape method steps and specific product directions.
- Stretch skin tight before using a prep wipe or tape.
- After you apply the tape, go back around the edge of the tape with your finger to seal the edges to your skin.
- Avoid using lotions where you intend to apply tape, as the tape may not stick well on top of lotion.

### 6.2 Removing Your Adhesive

If you wear additional adhesive with your infusion set or sensor and have a hard time removing the adhesive, speak with your Healthcare Professional about using one of the adhesive removers listed in the chart.

The images below show the methods you can use to secure your sites. Be sure to check product labels of the items you are using to make sure that they are effective for use in the way described.

Follow normal instructions for inserting infusion sets and sensor.

#### Single Tape Method – For Infusion Sets and Glucose Sensors

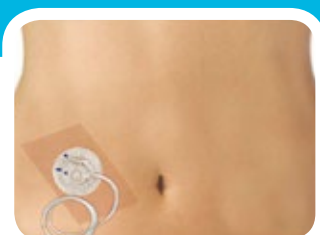
1. Clean the skin and allow the skin to dry.
2. Insert the infusion set (or glucose sensor).
3. Apply a clear adhesive dressing directly over the infusion set or sensor.

**Note:** If you're using this method with some adhesive dressings, you may not be able to disconnect your infusion set without removing the tape. There are also cut-out tape options for infusion sets as shown here on infusion set.



#### Open Face Sandwich Method – For Infusion Sets only

1. Clean the skin and allow the skin to dry.
2. Apply a clear adhesive dressing directly to your skin.
3. Insert the infusion set through the clear adhesive dressing. The adhesive on the infusion set will be sticking to the clear adhesive dressing instead of sticking directly to your skin.



### Sandwich Method - For Infusion Sets only

1. Clean the skin and allow the skin to dry.
2. Apply a clear adhesive dressing directly to the skin.
3. Insert the infusion set through the clear adhesive. In this way the adhesive on the infusion set will be sticking to the clear adhesive dressing instead of sticking directly to your skin.
4. Apply a second clear adhesive dressing on top of the infusion set.



**Note:** If you're using this method with some adhesive dressings, you may not be able to disconnect your infusion set without removing the tape. There are also cut-out tape options for infusion sets as shown here.



**IMPORTANT:** The open face sandwich and sandwich method should be used with infusion sets only. Do NOT use the sandwich methods with sensors because the sensor electrode is sensitive and could become damaged if inserted through anything other than dry skin prepped with alcohol.

### Non-Deodorant Antiperspirant Method For Infusion Sets and Glucose Sensors

1. Use a solid or spray antiperspirant for site use only (no gels or creams).
2. Apply to site area and wait 10-15 minutes.
3. Clean site to remove any excess antiperspirant from skin.
4. Clean your site and allow your skin to dry as usual before inserting infusion set or sensor.



## 6.3 Tips for Special Circumstances

### 6.3.1 Pain on Insertion

- You may put ice on the site to numb it slightly before inserting the needle.
- You may use a numbing cream (topical anaesthetic). Some are available by prescription only.
  - These require specific directions for use such as the amount of time for the numbing to happen. Be sure to follow the directions provided.
  - You will need to wipe all the cream off and clean the area allowing it to dry before insertion.
  - Check with your healthcare professional about which one may be best for you.
- If you experience pain for a period of time after the infusion set has been in place, this may indicate that you are in or near muscle tissue, and the set should be changed.

### 6.3.2 Site Change Awareness and Absorption Change

- Switching to alternative sites may result in some changes in BG control due to changes in the speed of insulin absorption in various sites.
- If you use a new location for your infusion set you may need to test your BG more frequently.

## 6.3.3 Skin Sensitivities, Allergies, and Skin Reactions

- Allergies and skin reactions such as itching, rashes or bumps may occur. When you notice them, determine the cause and use a different product. If it occurs from a tape or adhesive, consider using a different type. If it occurs from a prep or wipe, consider using a different type or use antibacterial soap.
- Notify your healthcare professional if you need assistance.

## 6.3.4 Pregnancy

- When the abdomen becomes too firm to pinch for an infusion set insertion, you may use the upper outer thigh, upper arm or hip instead.
- Switching to these alternative sites may result in some changes in BG control due to changes in the speed of insulin absorption so you may need to check your BG more frequently.
- Infusion sets may need to be changed every 24-48 hours during pregnancy.

Be sure to follow the advice of your healthcare professional.

## 6.4 Basic Troubleshooting





Problem	Solution
<b>Insertion</b>	
Difficulties with self-insertion	Try using an infusion set that has an available insertion device
<b>Infusion Site</b>	
Blood in the cannula Wet or leaky dressing Rash, redness, itching, burning	Change infusion set and site
Infusion set does not adhere	Use an adhesive suggested in the Tapes, Adhesives and Dressing section of this guide
<b>Tubing</b>	
Air or blood in tubing	Disconnect tubing and prime out the air
Loose connection	Reconnect to set, ensuring that connections are tight
Leakage or smell of insulin	Change infusion set, Tighten connections

## 6.5 When To Call

Your Healthcare Professional	Medtronic Diabetes 24-hour Toll Free
<p><b>Contact your Healthcare Professional for medical advice, including:</b></p> <ul style="list-style-type: none"> <li>• For any blood glucose (BG) or insulin adjustment questions and diabetes management</li> <li>• To report severe hypoglycaemic and hyperglycaemic episodes</li> <li>• To receive guidelines for exercise or temporary basal rates</li> <li>• To plan for sick days and hyperglycaemia</li> <li>• When there is illness, ketones, or vomiting</li> </ul>	<p><b>Before you call the HelpLine, review our online resources or workbooks. Then call:</b></p> <ul style="list-style-type: none"> <li>• For technical assistance with your insulin pump, blood glucose meters, or infusion sets and reservoirs</li> <li>• For technical assistance with your sensors or transmitter</li> <li>• To report issues or concerns with your Medtronic products</li> </ul> <p>In addition, consider uploading your device data into CareLink® Personal so that we may review it with you.</p>

## 7.1 Infusion Sets & Reservoirs

To order infusion sets and/or reservoirs, if NDSS approved, contact Diabetes Australia on 1300 136 588.\*

NDSS Code	Product Name	Length		Medtronic Code (by connection type)			
		Cannula/ Needle (mm)	Tubing (cm)	MiniMed® connector (for Paradigm 511, 512/712, 515/715, 522/722, Veo & MM640G pumps)	Luer-lock connector (for 507/507c, 508 pumps)		
564		<b>MiniMed® Quick-set™ infusion set</b> (10 per box)		6	60	MMT-399	-
659		6	80	MMT-387	-		
563		6	110	MMT-398	-		
562		9	60	MMT-397	-		
660		9	80	MMT-386	-		
561		9	110	MMT-396	-		
579		6	60	-	MMT-393		
578		6	110	-	MMT-391		
577		9	60	-	MMT-392		
576		9	110	-	MMT-390		
640		<b>MiniMed® Silhouette™ infusion set</b> (10 per box)		13	45	MMT-368	-
588		13	60	MMT-381	-		
641		13	80	MMT-383	-		
589		13	110	MMT-382	-		
569		17	60	MMT-378	-		
642		17	80	MMT-384	-		
568		17	110	MMT-377	-		
583		17	60	-	MMT-373		
582		17	110	-	MMT-371		
647		<b>MiniMed® Sure-T® infusion set</b> (10 per box)		6	60	MMT-864	-
650		6	80	MMT-866	-		
648		8	60	MMT-874	-		
651		8	80	MMT-876	-		
649		10	60	MMT-884	-		
652		10	80	MMT-886	-		
653		6	60	-	MMT-863		
656		6	80	-	MMT-865		
654		8	60	-	MMT-873		
657		8	80	-	MMT-875		
655	10	60	-	MMT-883			
658	10	80	-	MMT-885			
643		<b>MiniMed® mio® infusion set</b> (10 per box)		6	45	MMT-921	-
644		Pink	6	60	MMT-923	-	
645			6	80	MMT-925	-	
643.1			6	45	MMT-941	-	
644.1		Blue	6	60	MMT-943	-	
645.1			6	80	MMT-945	-	
645.2			6	80	MMT-965	-	
646		Clear	9	80	MMT-975	-	
705	<b>MiniMed® insulin reservoir</b> (10 per box)	1.8 mL	-	-	MMT-326A	-	
706		3.0 mL	-	-	MMT-332A	-	
704		3.0 mL	-	-	-	MMT-103A	
n/a	<b>MiniMed® Quick-serter™ insertion device</b> (purchase at <a href="http://www.medtronic-diabetes.com.au">www.medtronic-diabetes.com.au</a> , or Medtronic Customer Service on 1800 777 808, option 1)				MMT-395		
n/a	<b>MiniMed® Sil-serter™ insertion device</b> (purchase at <a href="http://www.medtronic-diabetes.com.au">www.medtronic-diabetes.com.au</a> , or Medtronic Customer Service on 1800 777 808, option 1)				MMT-385		

\* Visit <http://www.ndss.com.au> to see the NDSS eligibility criteria.

The following products have been recommended by many insulin pump users and healthcare professionals as alternative options for successful site experiences. You may wish to check with your healthcare professional before using any products. **NOTE** None of the products listed, as of date of this printing, contain latex.

## 7.2 Preps and Wipes

Preps and wipes are used to clean and prepare your skin prior to infusion set insertion. Barrier wipes are used after cleaning, and under tapes and adhesives to help protect sensitive skin.

**SKIN-PREP™ Wipes** by *Smith & Nephew, Inc.*

Effective protection between tape and skin. Recommended for tape and film adhesion. Non-irritating. NOTE: Skin-Prep Wipes should not be used to prep a glucose sensor insertion site.

[www.smith-nephew.com](http://www.smith-nephew.com)

## 7.3 Tapes, Adhesives and Dressings

Tapes and adhesives are used to hold an infusion set in place and you may need to try different products to find the right one for you.

**Hollister 7730** by *Hollister, Inc.*

Silicone adhesive that allows skin to breathe. Can be used on sensitive skin.

[www.hollister.com](http://www.hollister.com)

**Hypafix™ Tape** by *Smith & Nephew, Inc.*

Non-woven fabric made from white polyester material and coated with hypoallergenic adhesive on quick-release backing paper.

[www.smith-nephew.com](http://www.smith-nephew.com)

**Hy-Tape®** by *Hy-Tape International*

A tape with zinc oxide that is waterproof and washable. Adheres to wet, oily or hairy skin.

[www.hytape.com](http://www.hytape.com)

**IV3000™** by *Smith & Nephew, Inc.*

Clear, transparent tape dressing. Can be used to cover infusion sets or sensor sites.

[www.smith-nephew.com](http://www.smith-nephew.com)

**Mastisol®** by *Ferndale Laboratories, Inc.*

Clear, non-irritating liquid adhesive. Consider using Detachol® Adhesive Remover with this product.

[www.ferndalelabs.com](http://www.ferndalelabs.com)

**Micropore™ Surgical Tape** by *3M*

An economical, general purpose, breathable paper surgical tape. Available in various sizes.

[www.3m.com](http://www.3m.com)

**Paper Tape** by *Various Retailers*

Economical, for general use.

**Nexcare™ Durapore™ Durable Cloth Tape** by *3M*

Strong, durable, and multi-purpose, silk tape with excellent adhesion. Tears easily for application, is permeable, hypoallergenic and comfortable.

[www.3m.com](http://www.3m.com)

**OpSite™** by *Smith & Nephew, Inc.*

Transparent waterproof dressing.

[www.smith-nephew.com](http://www.smith-nephew.com)

**Polyskin™ II Transparent Dressing** by *Covidien*

Transparent dressings made of a thin polymer film coated with a hypoallergenic adhesive. A simple, effective delivery system allows one-handed application.

[www.kendallhealthcare.com](http://www.kendallhealthcare.com)

**Tegaderm™ I.V. Transparent Film Dressing** by *3M*

Transparent, water-resistant wound dressing.

[www.3m.com](http://www.3m.com)

**Transpore™ Surgical Tape** by *3M*

Clear, porous, plastic hypoallergenic surgical tape. Available in various sizes.

[www.3m.com](http://www.3m.com)

## 7.4 Adhesive Removers

If you have sensitive skin you may use adhesive removers to gently remove excess adhesive from your skin.

**Bard® Protective Barrier Film Remover** by

*C.R. Bard, Inc.* Convenient disposable wipes that effectively remove barrier films and adhesives.

[www.bardmedical.com](http://www.bardmedical.com)

**Detachol® Adhesive Remover** by *Ferndale*

*Laboratories, Inc.* Non-irritating, alcohol free and hypoallergenic liquid used to remove left over adhesive material from sensitive skin.

[www.ferndalelabs.com](http://www.ferndalelabs.com)

**UNI-SOLVE™ Wipes** by *Smith & Nephew, Inc.*

Designed to ease tape and adhesive dressing removal.

[www.smith-nephew.com](http://www.smith-nephew.com)



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that's all,  
enjoy!



MiniMed® 640G System<sup>^</sup>

« it thinks »

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**Manage your diabetes with technology that thinks.**

**Call 1800 777 808 for more information or visit [www.medtronic-diabetes.com.au](http://www.medtronic-diabetes.com.au).**

Our experienced customer support professionals understand diabetes and are product experts. They are always available to help answer your questions and help you achieve the glucose control you desire.



**Web:** [www.medtronic-diabetes.com.au](http://www.medtronic-diabetes.com.au) **Email:** [australia.diabetes@medtronic.com](mailto:australia.diabetes@medtronic.com)

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**Address:** Medtronic Australasia Pty Ltd, 97 Waterloo Road, North Ryde NSW 2113 Australia **Mail:** Medtronic Diabetes, PO Box 945, North Ryde, NSW 1670 **Telephone:** 02 9857 9000 **Facsimile:** 02 9857 9237 **24-hour Toll Free:** 1800 777 808<sup>\*</sup>

This information is designed to help you learn more about Diabetes therapy. It is intended to provide you with helpful information but is for information purposes only, is not medical advice and should not be used as an alternative to speaking with your doctor. Be sure to discuss questions specific to your health and treatments with a healthcare professional. For more information please speak to your healthcare professional or log on to: [www.medtronic.com.au](http://www.medtronic.com.au)

**References:** <sup>^</sup>Components sold separately. Automated insulin delivery is made possible through combining Medtronic insulin pump and continuous glucose monitoring technology. *\*Please note:* In contacting the Diabetes Toll Free, personal and health information may be disclosed to an operator located outside Australia. <sup>\*</sup>Based on total number of pump consumables sold nationally, NDSS sales data 2011. **1.** Thethi TK, Outland J, Kawji H, et al. Consequence of delayed pump infusion line change in patients with type 1 diabetes mellitus treated with continuous subcutaneous insulin infusion. *J Diab Comp.* 2010;24(2):73-78. **2.** Centers for Disease Control (CDC). Toxic-shock syndrome in a patient using a continuous subcutaneous insulin infusion pump - Idaho. *MMWR.* 1983;32(31):404-406, 412. **3.** Guilhem I, Leguerrier AM, Lecordier F, Poirier JY, Maugeudre D. Technical risks with subcutaneous insulin infusion. *Diab Metab.* 2006;32:279-284. **4.** Conwell LS, Pope E, Artiles AM, Mohanta A, Daneman A, Daneman D. Dermatological complications of continuous subcutaneous insulin infusion in children and adolescents. *J Ped.* 2008;152:622-628. **5.** Babar GS, Ali O, Parton EA, Hoffmann RG, Alemzadeh R. Factors associated with adherence to continuous subcutaneous insulin infusion in pediatric diabetes. *Diab Tech Ther.* 2009;11:131-137. **6.** NovoLog® [proposed physician insert]. Princeton, NJ: Novo Nordisk Inc.; 2007.

**Safety Information: MiniMed® 640G Insulin Pump** is indicated for the continuous delivery of insulin, at set and variable rates, for the management of diabetes mellitus in persons requiring insulin. In addition, the Enlite™ glucose sensor is indicated for continuous or periodic monitoring of glucose levels in the fluid under the skin, and possible low and high blood glucose episodes. The pump displays continuous glucose values and stores this data so that it can be analysed to track patterns and improve diabetes management. Pump history can be downloaded to a computer for analysis of historical glucose values. The continuous glucose values provided by the MiniMed® 640G insulin pump are not intended to be used directly for making therapy adjustments. Rather, they provide an indication that a confirmation fingerstick measurement may be required. All therapy adjustments should be based on measurements obtained using a home glucose monitor and not based on the value displayed by the pump.

**Safety Information: Medtronic CareLink® Software** is intended for use as a tool to help manage diabetes. The purpose of the software is to take information transmitted from insulin pumps, glucose meters and continuous glucose monitoring systems, and turn it into Medtronic CareLink® reports that can be used to identify trends and track daily activities—such as carbohydrates consumed, meal times, insulin delivery, and glucose readings. Medtronic CareLink® report data is intended for use as an adjunct in the management of diabetes only and NOT intended to be relied upon by itself. Patients should consult their healthcare professionals familiar with the management of diabetes prior to making changes in treatment.

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