

Nov. 19, 1968

F. C. STEINBOCK

3,411,620

COMBINATION CATHETER TRAY AND PACKAGE

Filed May 15, 1967

4 Sheets-Sheet 1

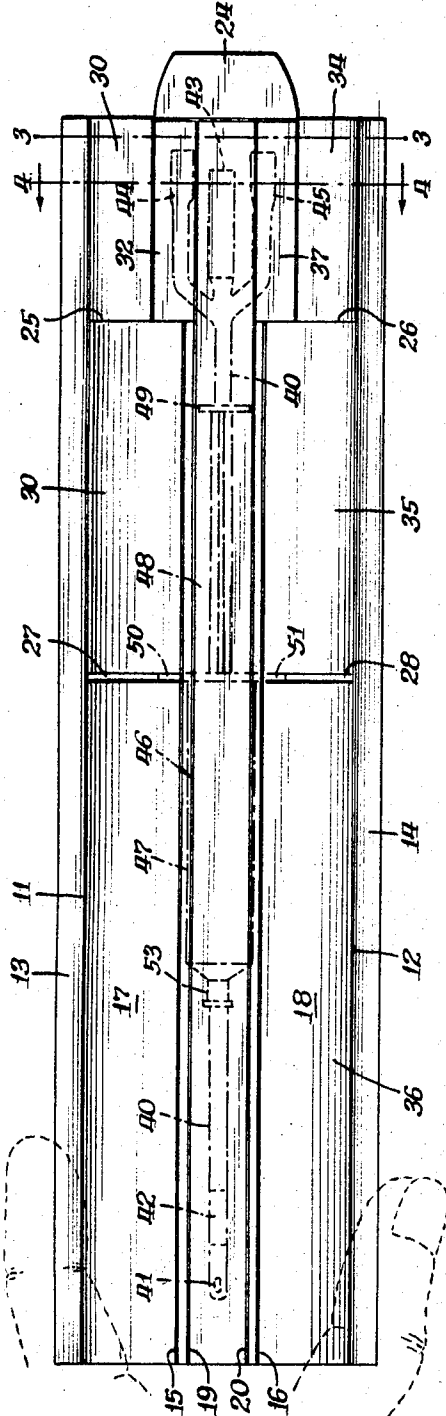


Fig. 2.

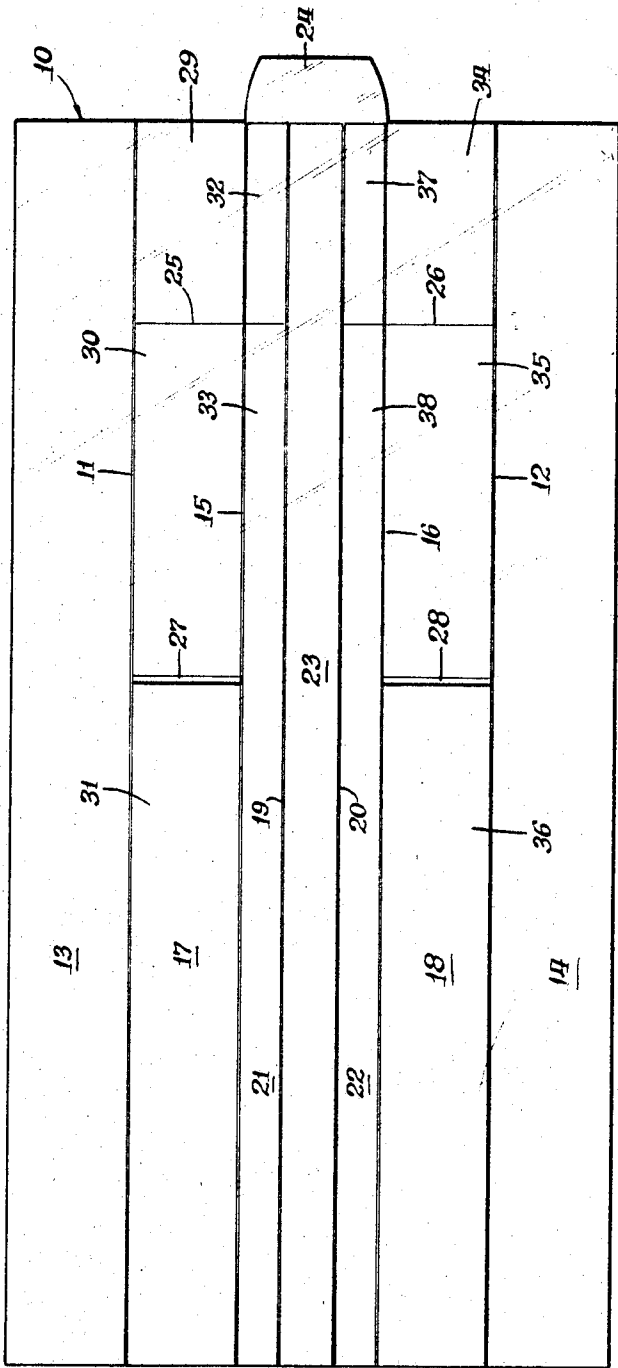


Fig. 1.

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4 Sheets-Sheet 2

Fig. 3.

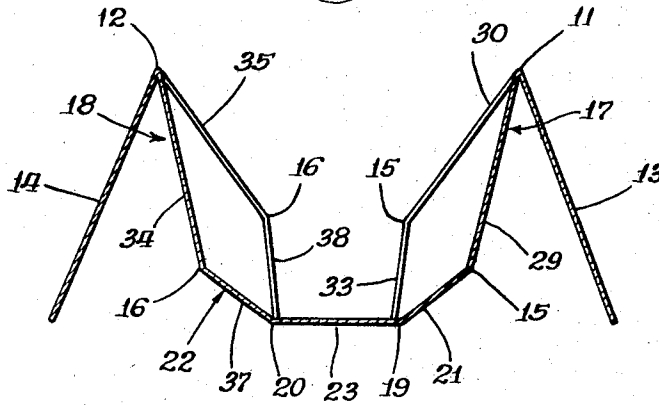
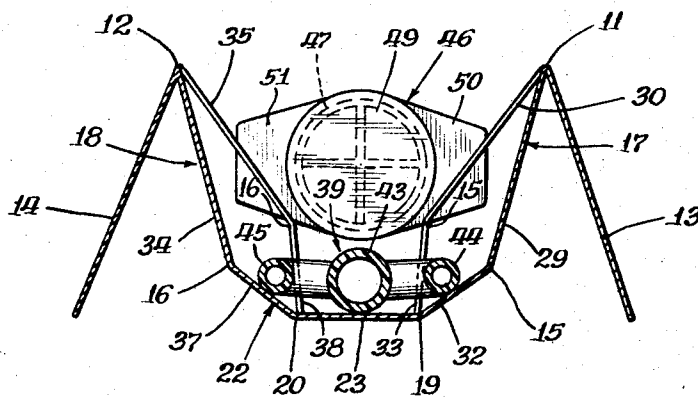


Fig. 4.



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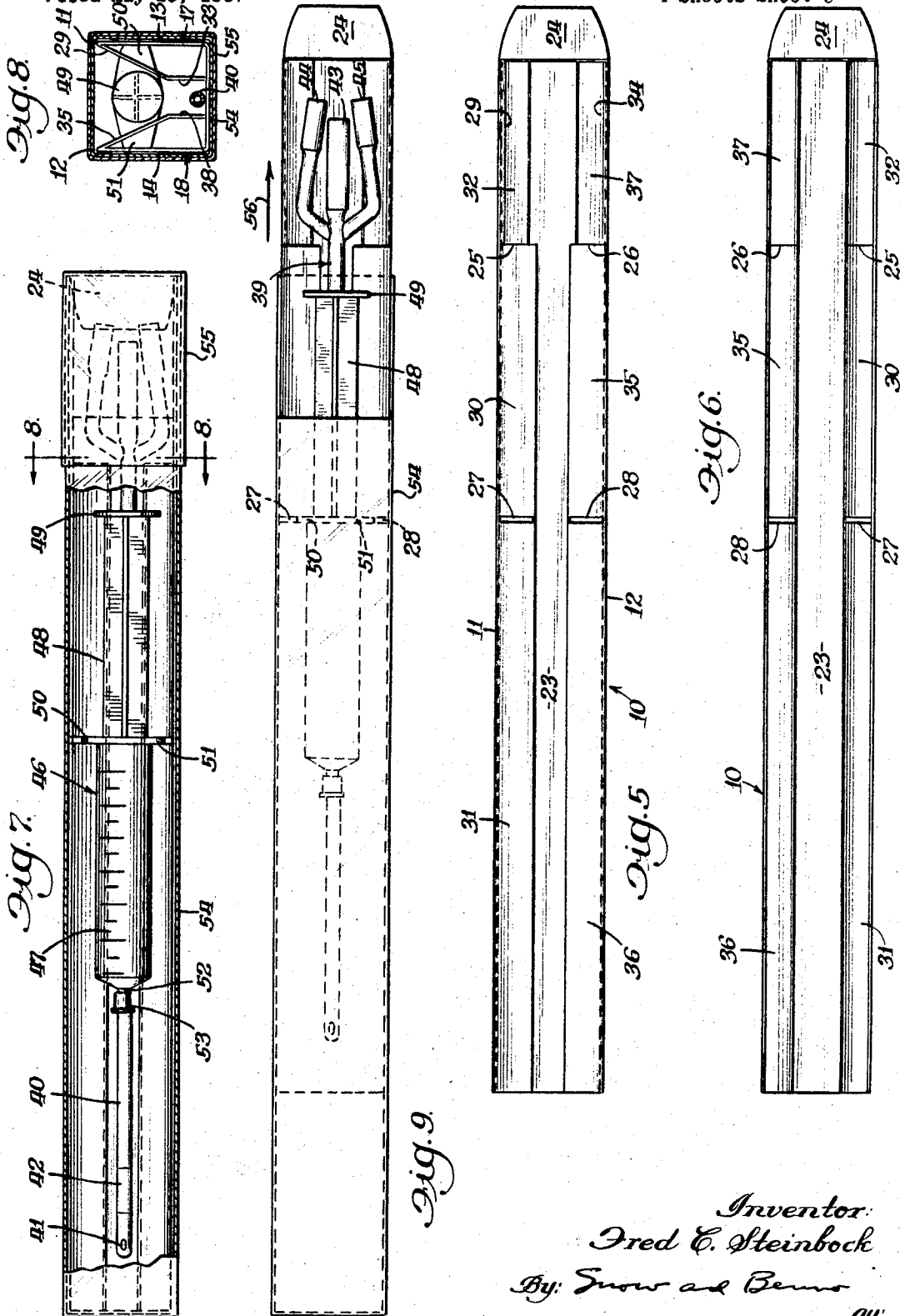
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COMBINATION CATHETER TRAY AND PACKAGE

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4 Sheets-Sheet 3



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COMBINATION CATHETER TRAY AND PACKAGE

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4 Sheets-Sheet 4

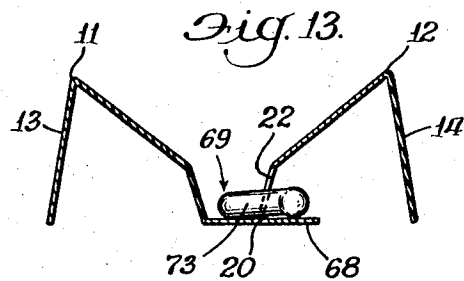
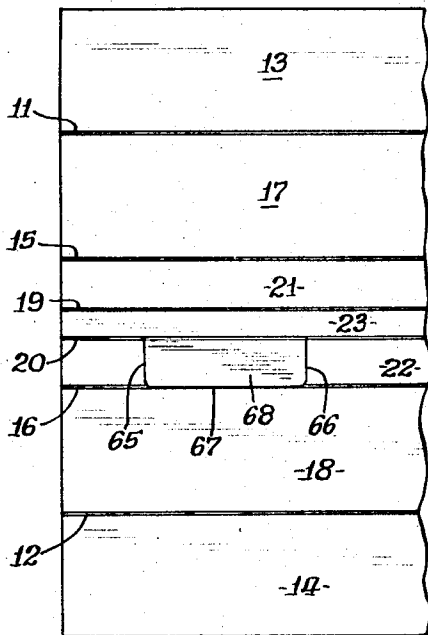
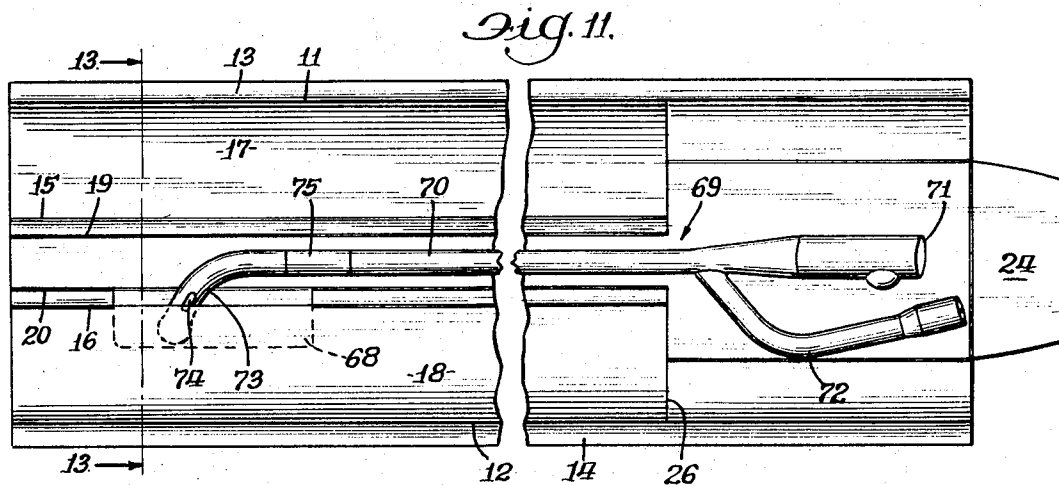
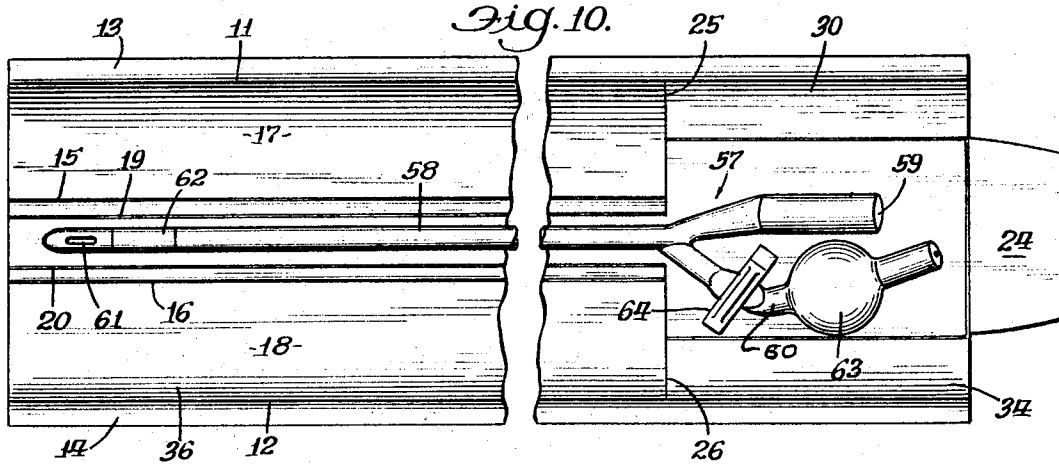


Fig. 12.

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3,411,620

COMBINATION CATHETER TRAY AND PACKAGE

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8 Claims. (Cl. 206—63.2)

ABSTRACT OF THE DISCLOSURE

A tray functioning first as a package for a catheter and syringe and secondly as a sterile field for the catheter and syringe as these devices are used in the treatment of patients.

This invention relates to a new and improved combination catheter tray and package.

In many and a now growing number of instances, a patient may be catheterized under other than ideal sanitary conditions such as exist in hospital operating rooms. This is especially so in the case of urethral catheterizations. Catheters oftentimes are used in doctors' offices and nursing homes, especially in nursing homes for the aged. It is the exception for these offices and homes to have facilities to provide the ideal sterile environment desirable for catheterization such as exists in an operating room. For various reasons, even patients confined to a hospital and who are to be catheterized as part of a pre-operative or post-operative treatment are catheterized in the patient's room or ward. There is a need therefore for packaged sterile catheters and catheter kits containing catheterization accessories. Even under ideal conditions of use in operating rooms and available sterilization equipment, increasing hospital costs and the shortage of trained personnel have created a demand for the catheters and kits packaged in a sterile condition. It was with this in mind that the device of this invention was conceived and put into practice.

A principal object of this invention is to provide a novel combination sanitary catheter tray and package therefor.

An important object of this invention is to provide a novel sterile field in the form of a holding tray for a catheter and accessories.

Another important object of this invention is the provision of novel means in a simple single sheet die cut tray for a catheter and syringe to securely hold those devices against relative movement during their period of being packaged and to provide for easy access to these articles by a user when the tray is spread out upon removal from its outer package.

Still another important object of this invention is to provide a novel folding tray for a catheter and syringe which permits the tray to act in the dual capacity of a sanitary field for firmly yet removably holding these devices conveniently accessible in the order of their use and of a means for securely locking these devices against relative movement while being packaged.

Another and still further important object of this invention is to provide a novel catheter holding tray which is slidably removable from an outer package to enable the tray to act as a sanitary dispensing table.

Other and further important objects and advantages will become apparent from the following specification and accompanying drawings.

In the drawings:

FIGURE 1 is a top plan view of a tray of this invention prior to folding.

FIGURE 2 is a top plan view of the tray folded to receive and provide a sterile field for a catheter and syringe.

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FIGURE 3 is a sectional view taken on the line 3—3 of FIGURE 2.

FIGURE 4 is a sectional view taken on the line 4—4 of FIGURE 2.

FIGURE 5 is a top plan view of the tray of FIGURES 1 and 2 and compacted in a manner to permit it to be slid into an outer covering box.

FIGURE 6 is a bottom plan view of the tray compacted as in FIGURE 5.

FIGURE 7 is a top plan view of the catheter tray and package of this invention.

FIGURE 8 is a sectional view taken on the line 8—8 of FIGURE 7.

FIGURE 9 is a top plan view of the combination catheter tray and package with the tray shown being withdrawn from the outer covering box.

FIGURE 10 is a top plan view of the tray folded as in FIGURE 2 and providing a sterile field for a self inflating catheter.

FIGURE 11 is a top plan view of a tray folded as in FIGURES 2 and 10 and modified to receive a Coudé catheter.

FIGURE 12 is an extended plan view of the tray of FIGURE 11 showing the modified portion thereof.

FIGURE 13 is a sectional view taken on the line 13—13 of FIGURE 11.

As shown in the drawings:

The reference numeral 10 indicates generally an elongated die cut sheet of cardboard or paperboard or the like constituting the catheter tray of this invention. The sheet 10 includes longitudinally disposed parallel scores 11 and 12 which define lateral side strip members 13 and 14, respectively. Longitudinally disposed parallel scores 15 and 16 are also provided in the sheet 10 and define strip members 17 and 18, respectively, which are disposed inwardly on the sheet from the outer side strip members 13 and 14. The sheet is further provided with longitudinally disposed parallel scores 19 and 20 which define inwardly positioned and longitudinally disposed strip members 21 and 22, respectively. The remaining center strip of the card or sheet 10 is identified by the numeral 23. The sheet 10 is provided with a finger engaging pull tab 24 which projects from one end thereof and spans the centrally disposed defined strips 21, 22 and 23.

The die cut sheet 10 in addition to having the various longitudinally disposed parallel scores and the finger engaging pull tab 24 is provided with a partial transverse slit 25 which extends through the defined elongated strips 17 and 21. Similarly a partial transverse slit 26 extends through the defined strips 18 and 22 and is disposed in axial alignment with the spaced apart slit 25. The die cut sheet is also provided with a transversely disposed elongated notch 27 which extends through the defined elongated strip 17. Another transversely disposed elongated notch 28 extends through the defined strip 18 and lies in axial alignment with the spaced apart notch 27. The slit 25 and the notch 27 together divide the elongated strip 17 into successive longitudinal portions 29, 30 and 31. The slit 25 divides the strip 21 into two longitudinal portions 32 and 33. On the other side of the median or intermediate elongated strip 23 the slit 26 and the notch 28 together divide the strip 18 into successive longitudinal portions 34, 35 and 36. The slit 26 divides the elongated strip 22 into two longitudinal portions 37 and 38.

There has hereinbefore been described a die cut sheet having various longitudinal scorings, spaced apart aligned transverse slits, and spaced apart, aligned transverse notches to provide a catheter and syringe tray. The tray is shown in a partially compacted or folded form in FIGURE 2 and is shown in a fully compacted form in FIGURES 7, 8 and 9. Upon completion of the die cutting

the scoring, the slitting, and the notching, the tray 10 is preliminarily folded or bent to assume a shape as shown in FIGURES 2, 3 and 4. Generally in this condition the device in end view or a sectional view appears to simulate the letter M. The outer arms of the M comprise the longitudinal strips 13 and 14 and act as supporting legs for the tray when the catheter and its accompanying syringe is mounted on the tray. The inner arms of the M constitute a cradle for the catheter and the syringe. The aligned spaced apart slits 25 and 26 and the aligned spaced apart transverse notches 27 and 28 in the intermediate portion of the M act to hold the catheter and syringe in a secure manner on the tray.

The tray of the foregoing description is suited for holding a syringe and a retention type, irrigation catheter, as best shown in FIGURES 2, 4, 7, 8 and 9. The catheter, identified by the numeral 39, includes a main tubular portion 40 terminating at one end in a discharge end 43 and branching side arms 44 and 45 adjacent to the discharge end of the tube 40 and disposed on opposite sides thereof. The opposite end of the tube 40 which is positioned in the body cavity contains at least two openings therein in the case of this type of a catheter. The numeral 41 designates one of these openings which in this instance is the irrigation opening in communication with the side arm 44 by means of a channel within the tube 40. Liquids or fluids may be introduced into the side arm 44 through an opening at its end and discharged from the opening 41 into the body cavity in which the catheter is placed. A drainage opening or openings are also located at this end of the catheter, usually on the side opposite to the irrigation opening 41. The drainage openings lead to a drainage channel within the tube 40 and the discharge end 43.

The tubular portion is further provided with an inflatable sleeve 42 which is spaced inwardly from the end portion of the tube 40 in which the drainage and irrigation openings are located. This sleeve is inflatable in the manner known for Foley-type retention catheters after insertion of the tube in the body to thereby securely hold the tube within the body passage. Inflation is accomplished by introducing an inflating medium, such as water, into the side arm 45 which leads to a third channel within the tube 40. This third channel terminates in an opening in the wall portion of the tube 40 located beneath the sleeve 42. A sufficient volume of water is introduced to cause the sleeve to inflate to form what is commonly called the retention balloon on a Foley catheter. The discharge end 43 and side arms 44 and 45 are adapted to engage with tubes or a syringe in a known manner. The inflation side arm 45 is preferably provided with a valve means built therein, such as a self-sealing needle plug, for the purpose of controlling the admission of fluid to and from the inflatable sleeve 42 of the catheter 39.

A syringe 46 for use in cooperation with the catheter 39 has a calibrated cylinder 47 and a cooperating piston 48 which telescopically engages the cylinder 47. The syringe is preferably made of a plastic or glass with at least some degree of transparency to permit the user of the catheter to see the liquid contents. The piston 48 is provided with a finger engaging end 49 while the calibrated cylinder is provided with diametrically disposed finger gripping portions 50 and 51 so that the user may concurrently grip the stationary fingers 50 and 51 and the reciprocating finger engaging end 49 of the piston 48. The opposite finger gripping portions 50 and 51 constitute integral flanges at the upper edge of the syringe cylinder 47. The other end of the syringe is provided with a discharge nozzle 52 which is of considerably smaller diameter than the diameter of the cylinder or the piston which cooperates therewith. As shown in condition for packaging, the discharge nozzle 52 is covered with a rubber sealing cap 53.

The syringe 46 may be used to introduce water into the end of the inflation side arm 45 to inflate the sleeve 42. For this purpose the cylinder 47 preferably is pro-

portioned to contain or calibrated to show the amount of water sufficient to inflate the sleeve 42 without rupture of the sleeve. The discharge nozzle may be adapted to directly engage the end of side arm 45 or may be fitted with a hypodermic needle if the side arm is provided with a self-sealing needle plug. The syringe may also be used to introduce irrigating or other fluids into the side arm 44 for passage through the connecting channel to the opening 41 and into the body cavity in which the tube 40 is placed.

As best shown in FIGURES 7, 8 and 9 an outer elongated box 54 is adapted to snugly receive the fully compacted tray 10 with the catheter and syringe held therein. Slidable movement of the tray either for insertion or removal into or from the outer box 54 is accomplished by the user gripping the outer box with one hand and with the other hand gripping the finger engaging pull tab 24 sliding the tray 10 into and out of the box. When the tray is fully inserted within the box 54 an outer end telescoping cap or cover 55 is provided for the box 54 and acts to completely enclose the carrying tray for the catheter and its syringe. The box and telescoping cover is then sealed against microbial infiltration, e.g., by means of an outer-wrap sheet, and the packaged unit including its contents sterilized in a known manner. As an alternative to an overwrap, adhesive tape may be used to seal the telescoping cover to the box, or any openings in the package through which bacteria and the like may pass to contaminate the tray and contents after sterilization.

In manufacture and assembly, the tray of this invention is die cut with scores, slits and notches, as shown in FIGURE 1 and then partially compacted or folded to assume the M shape in cross section as shown in FIGURES 3 and 4. In this position the catheter 39 and the syringe 46 are placed into the tray for subsequent packaging. As shown in FIGURES 2, 3, 4, 7 and 9 the elongated rubber tubular portion 40 of the catheter lies in the centrally disposed U shaped chamber or trough having as its bottom the central strip 23 and as its sides the portions 33 and 38 of the longitudinal strips 21 and 22, respectively. The forked or branched end of the catheter comprised by the discharge end 43 and the side arms 44 and 45 of the tube 40 lie on the central portion 23 of the tray 10 and on the adjacent side portions 32 and 37 which constitute the forward ends of the strips 21 and 22 adjacent the pull tab 24. As shown in FIGURE 3, the portions 33 and 38 which flank the long portion of the catheter tube 40 are disposed substantially vertically while the forward portions 32 and 37 are disposed almost flat with the central portion 23 to receive the branched ends 43, 44 and 45 of the catheter 39. This differential in the angular disposition of the members 32 and 33, and 37 and 38 is permitted by reason of the slit 25 and the aligned spaced apart slit 26, respectively. The portion 29 of the longitudinal strip 17 is disposed at a relatively steep or almost vertical angle to a horizontal while the portion 30 thereof is disposed at a shallow angle relative to that horizontal. Similarly the portion 34 of the strip 18 is disposed at a relatively steep angle to the horizontal while the portion 35 of the longitudinal strip 18 is disposed at a shallow angle relative to the horizontal. The entire M shaped tray is substantially symmetrical about the center strip 23 whereby the angular dispositions of the portions 29 and 34 and 30 and 35 are identical as are the portions 32 and 37, and 33 and 38.

The calibrated tube portion 47 of the syringe 46 is cradled within the generally V-shaped notch provided by the shallow angle inclined wall portions 30 and 35 respectively of the strips 17 and 18 and also the rearwardly extending portions of those inclined walls 31 and 36 which are disposed rearwardly of the transversely cut notches 27 and 28. These notches 27 and 28 cooperate as sockets with the finger gripping side portions 50 and 51 of the syringe 46. The diametrically disposed finger gripping portions 50 and 51 pass through and engage the notches 27 and 28, respectively, as sockets.

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It is therefore apparent that the paperboard tray, preliminarily scored, slit and notched, is adapted to efficiently receive and hold the various portions of a catheter and a syringe in a manner to permit a user to conveniently insert or remove these devices without impairing the sanitary conditions of the tray.

Following the placement of the catheter and the syringe in the partially compacted tray as shown in both of FIGURES 2 and 4, the tray is fully folded or compacted so that it forms a substantial square or rectangle as shown in FIGURE 8, whereupon the entire tray and the included catheter and syringe is slid into the outer package 54 and the telescoping cap 55 is applied thereto as shown in FIGURE 7. It should be apparent that the carton is large enough to include a packet or tube of petroleum jelly, such as might be needed in the use of the catheter.

In the subsequent use of the catheter and syringe the cover 55 is removed from the box 54 and the tray 10 pulled outwardly in the direction of the arrow 56 by the pull tab 24, as shown in FIGURE 9. When the tray is fully removed from the outer package 54 it normally reassumes its partially compacted condition of FIGURES 2, 3 and 4 so that the tray may be placed on a table or other article which may not in itself be sanitary but which is made sanitary for reception of the catheter and syringes by reason of the intermediately disposed tray 10. It is from this tray that the doctor or other technician proceeds to use the catheter or syringes being held by the carton of this invention. The following is an example of the use of a sterilized packaged catheterization kit such as described and shown in FIGURES 7, 8 and 9 in the case of a patient to be catheterized in the patient's room of a hospital. The packaged kit may be brought directly from central supply to the room. The person to do the catheterization may then prepare the patient. The preparation may include positioning the patient on the bed and arrangement of clothing and bed covers. The package itself may be placed upon the bed, as between the legs of the patient. The outerwrap is then broken or cut, removed and discarded. The package is then opened by sliding the telescoping cover 55 from the box 54 while the box is held in one hand and the cover in the other. The removed is set aside for eventual discard or discarded directly in a waste container. The tab 24 is now exposed and in a position to be grasped without body contact with any exposed surface of strip members 13, 14, 17, 18 and 21-23 and the catheter and its accessories. While still holding the box 54, the tab 24 is grasped by the fingers of the other hand to pull the tray with its contents from the box, and in position conveniently close to the patient. The tray and its contents are thus removed from the package without contacting any portion of the outside of the box and or any portion of the person which may not be sterile. As indicated previously, the tray tends to spread out to some extent after removal from the box. The tray surfaces provide a sterile field holding the catheter and other accessories ready for use. If the same person is to insert the catheter in the patient, procedure requires at least a scrub-down of that person's hands and preferably also forearms. The person may then remove the contents from the tray as needed and proceed with the act of catheterizing the patient. The slanting side walls of the tray usefully serve to direct the fingers of the person in reaching for the contents therein should the person's attention be distracted by some other need of the patient. In the case of the procedure described, the tray may be removed from the box and positioned so that the insertion tip of the catheter is pointed toward the patient's crotch. The tray may then serve as a sterile support for the trailing end of the catheter when held near the tip end of the tube 40 while initially inserting the catheter.

FIGURE 10 shows the identical tray of FIGURES 1 through 9 with a self-inflating retention catheter therein.

This catheter is provided with a self-contained inflating liquid for the retention balloon; see U.S. Patent No. 3,275,001. With such a catheter the need for a syringe to effect an inflating of the retention balloon is eliminated and the package of this invention may or may not include a syringe. The tray of FIGURE 10 is provided with all of the same reference numerals as applied in FIGURES 1 through 9. The self-inflating catheter identified by the numeral 57 includes a main tubular portion 58 terminating at one end in a discharge end 59 and a branching side arm 60 adjacent to the discharge end of the tube 58. The opposite end of the tube 58 which is positioned in the body cavity has a side opening 61 which comprises a drainage opening. The opening 61 leads to a drainage channel within the tube 58.

The tubular portion 58 is further provided with an inflatable sleeve 62 which is spaced inwardly from the end portion of the tube 58 in which the drainage opening 61 is located. This sleeve 62 is inflated by a measured amount of a fill liquid which is retained in a fill bag 63 of the side arm 60 prior to insertion of the tube in the body. In this particular catheter of FIGURE 10 the fill bag 63 is an expanded portion of the side arm 60 which is expanded by the fill liquid charged into the arm through the plugged outer end thereof and retained therein by means of the spring clamp 64. The spring clamp 64 closes the passage of the side arm leading to a fill channel within the tube 58 and the chamber defined by the inflatable sleeve 62. The fill liquid, e.g., water, is prevented from escaping from the outer end of the arm 60 by a valve means such as a self-sealing needle plug as described for the catheter of FIGURES 1 to 9. The clamp 64 prevents the inflating medium from passing further into the catheter at this time. The resistance to the inflating of the sleeve 62 is less than the resistance required to inflate the portion of the side arm forming the fill bag 63. It is this differential in resistance to inflation that permits the catheter of FIGURE 10 to be known as a self-inflating catheter.

The actual use of the catheter of FIGURE 10 is very similar to that of the catheter of FIGURES 1 to 9. However, the method of inflating the sealing balloon adjacent the end of the main tubular portion is different. After the catheter is inserted into a desired position in a body cavity the spring clamp 64 is released at which time the inflating medium in the fill bag 63 moves to the more easily inflatable sleeve 62. The balloon thus formed serves to securely hold the tube within the body cavity. The use of a syringe with a self-inflatable catheter such as in FIGURE 10 is operational as a syringe is ordinarily used to inflate the sleeve 62. However, a syringe may be incorporated in the package and be used in removing the inflating medium from the sleeve 62 after the catheterization process has been completed and the device is to be removed from the body.

FIGURES 11, 12 and 13 depict a slightly modified form of catheter supporting tray. The tray is particularly designed to receive a Coudé type of catheter which is characterized by its body engaging end being bent or crooked. Here again the parts of the tray that are common to the tray of FIGURES 1 to 9 are given the same reference numerals. As shown in FIGURE 12 the longitudinally disposed strip member 22 of the tray 10 is cut or slit at 65, 66 and 67 to define a rectangularly shaped flap 68 which is hingedly swingable about the score line 20. When this hinged flap 68 is swung open it provides storage room for the end of a Coudé catheter. It also serves as part of the sterile field provided by the tray in use to keep the catheter tip out of contact with a non-sterile surface during the make-ready preparation for catheterizing a patient.

A Coudé catheter, identified broadly by the numeral 69, comprises a main tubular portion 70 terminating at one end in a discharge end 71. A branched side arm 72 is located adjacent to the discharge end of the Coudé

catheter tube 70. The opposite end 73 of the tube 70 which is inserted into a body passage is bent or crooked laterally. Just inwardly of this end of the tube 70 there is provided a drainage opening 74 which communicates with a drainage channel within the elongated tube 70 leading to the discharge end 71.

The tubular portion 70 is further provided with an inflatable sleeve 75 which is spaced inwardly from the end portion of the tube 70 in which the drainage opening 74 is located. This sleeve 75 is inflatable in the same manner as in the catheter of FIGURES 1 to 9 or the catheter of FIGURE 10. Inflation is effected after insertion of the bent end catheter into the body to thereby securely hold the tube 70 within the body passage. As in the prior explanations of inflation an inflating medium is inserted into the side arm 72 which leads to a second channel within the main tubular portion 70. This second channel terminates in an opening in the wall portion of the tube 70 located beneath the sleeve 75. When a sufficient volume of the inflating medium is inserted into the chamber beneath the sleeve, the sleeve 75 is caused to balloon out and be the means for holding the catheter firmly within the body during the discharge of certain body liquids. As previously stated the sleeve 75 may be inflated by means of an inflating medium from an external source or a self contained source of inflating medium build into the catheter itself.

I am aware that numerous details of construction may be varied throughout a wide range without departing from the principles disclosed herein, and I therefore do not propose limiting the patent granted hereon otherwise than as necessitated by the appended claims.

What is claimed is:

1. A combination package and use tray comprising a tray having a one piece die cut sheet, said sheet having a plurality of longitudinally disposed substantially parallel scorings, said sheet folded about its longitudinal scorings to form a generally M shape in cross section creating a central cradle between the center arms of the M and the outer arms of the M constituting tray supporting legs, and package enclosure means for said one-piece folded sheet tray.

2. A combination package and use tray for a catheter and syringe comprising a one piece die cut sheet having a plurality of longitudinally disposed substantially parallel scorings arranged in a manner to provide for folding of the sheet about its longitudinal scorings to form a generally M shape in cross section to cradle a catheter on a central portion of the M with the outer arms of the M constituting tray supporting legs, and enclosure means for said one-piece folded sheet to hold said sheet in catheter holding position.

3. A combination package and use tray for a catheter and syringe comprising a one-piece die cut sheet having a plurality of longitudinally disposed substantially parallel scorings defining a plurality of longitudinal strips arranged in a manner to permit folding of the sheet to a substantially M shape in cross section, the inner strip arms of the M each being further longitudinally scored and the outer strip arms of the M acting to support the sheet when folded, and said inner strip arms of said sheet having spaced apart aligned transverse slits arranged in a manner to divide the inner strip arms in two longitudinal portions whereby in use the inner strip arms of the M have two separate angular dispositions relative to the outer M strip arms and divided at the position of the transverse slits, whereby when the sheet is folded in an M shape about its longitudinal scorings it forms a cradle for a catheter having at least one branched arm at the discharge end thereof, with the branched arm of the catheter lying in that end of the folded sheet having the inner strip arms of the M at the steepest vertical angle, and enclosure means for said one-piece folded sheet to hold said sheet in catheter holding position.

4. A combination package and use tray for a catheter

with at least one branched arm at one end thereof and a syringe with diametrically opposed finger engaging portions comprising a one-piece die cut sheet having a plurality of longitudinally disposed substantially parallel scorings arranged in a manner to permit folding of the sheet to a substantially M shape in cross section, the inner arms of the M each being longitudinally scored and the outer arms of the M acting to support the sheet when folded, and said sheet having spaced apart aligned transverse slits arranged in a manner to divide the inner arms of the M in two longitudinal portions whereby one portion of the inner arms of the M are disposed at a shallow vertical angle relative to a horizontal and the other portions of the inner arms of the M are disposed at a steep vertical angle relative to the horizontal and the two portions are divided at the position of the transverse slits, and said sheet further having certain spaced apart aligned transverse notches in the end of the folded sheet having the inner M arms at the shallowest vertical angle, whereby when the sheet is folded in an M shape about its longitudinal scorings it forms a cradle for a catheter and a syringe, with the branched arm of the catheter lying in that end of the folded sheet having the inner M arms at the steepest vertical angle, and whereby when a syringe is cradled in the inner arms of the M the diametrically disposed finger engaging portions thereof pass through the said notches and act to firmly hold the syringe in the M cradle, and enclosure means for said one-piece folded sheet to hold said sheet in catheter and syringe holding position.

5. A catheter holding trap comprising a die cut sheet folded about longitudinal lines in a substantially M shape in cross section and defining a generally U shaped central channel intermediate the inner M arms to receive and hold a catheter tube, the tray having spaced apart transverse slits in alignment one with the other and disposed in the inner arms of the M, and said inner arms of the M further being longitudinally scored to provide for a wide portion to receive the branched ends of a catheter on one side of the transverse slits in a substantially flat position.

6. A catheter and syringe holding trap comprising a die cut sheet folded about longitudinal lines in a substantially M shape in cross section and defining a generally U shaped central channel intermediate the inner M arms to receive and hold a catheter tube, the tray having spaced apart transverse slits in alignment one with the other and disposed in the inner arms of the M, and said inner arms of the M further being longitudinally scored to provide for a wide portion to receive the branched ends of a catheter on one side of the transverse slits in substantially a flat position, and a syringe adapted to be cradled in the inner arms of the M above the catheter tube in the U shaped central channel and at the end opposite the branched ends of the catheter on the other side of the transverse slits.

7. A device as set forth in claim 6 in which the syringe is provided with diametrically disposed finger engaging flanged portions and those portions of the inner arms of the M supporting the syringe are notched to receive said flanged portions of said syringe and thereby hold the syringe in fixed position on the tray.

8. A catheter holding tray comprising a die cut sheet folded about longitudinal lines in a substantially M shape in cross section and defining a generally U shaped central channel intermediate the inner M arms to receive and hold a catheter tube, the tray having spaced apart transverse slits in alignment one with the other and disposed in the inner arms of the M, and said inner arms of the M further being longitudinally scored to provide for a wide portion to receive the branched ends of a catheter on one side of the transverse slits in substantially a flat position, and one side of the U shaped central channel being slit to form a flap hinged along its junction with the bottom of said U shaped central channel,

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whereby when the catheter being used is of the Coudé type the bent end will nest in the space provided by the hinged flap.

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