thus it clamps the installed delivery arrangement to stop the medical fluid flow) can potentially increase if, after a first injection procedure, the injection system is no longer operated or if it is operated only few times with long pause times between two successive injection procedures. In fact the Applicant noticed that, if the delivery arrangement tubing remains clamped for a long time, sometimes it may happen that de-clamping is not properly executed or it is partially executed by the injection system. This is due to the fact that, if the tubing remains squeezed for a long period of time, the opposite surfaces of the tubing wall (that are pressed the one against the other for closing the tubing inner passage and preventing the medical fluid to flow there into), stick to each other and the tubing is not able to recover its original cylindrical shape. This event is clearly undesirable since the correct functioning of the injection system cannot be guaranteed if the clamping means is not properly operated. It is apparent that, if the clamping means is requested to be activated in the de-clamping function at a predetermined step of the injection procedure and this action is not performed (because the tubing wall remains completely squeezed and stuck and the regular flow of the medical fluid is substantially prevented ) or it is only partially performed (because the tubing wall is partially stuck and the regular flow of the medical fluid is partially prevented) or it is performed with a certain delay (because the tubing requires more time to fully recover its original shape), the flowing of the medical fluid does not occur or it occurs only partially, and the desired correct injection procedure is not provided to the patient.

Since the increase of the usage time of the delivery arrangement is clearly considered as an advantageous solution both from economic and patient's safety perspectives as indicated above, the Applicant has perceived the need of finding a technical solution which can overcome the stickiness problems that may nullify the benefits of the new, long duration delivery arrangement.

Document US 3,800,794 discloses a method and an apparatus for parenteral administration of medical fluids, wherein a normally shut-off intravenous feeding tube is selectively opened at a given frequency and the open period duration is automatically regulated by a digital control system to establish a fluid flow rate at