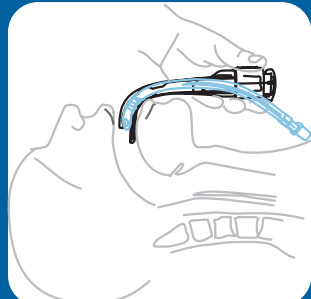


AIRTRAQ® OROTRACHEAL INTUBATION PROCEDURE

I. PREPARATION

- 1 Select the ETT size and the corresponding Airtraq.
- 2 Turn the light ON. Wait until the light stops blinking.
- 3 Lubricate the ETT and place it into the Airtraq's guiding channel.

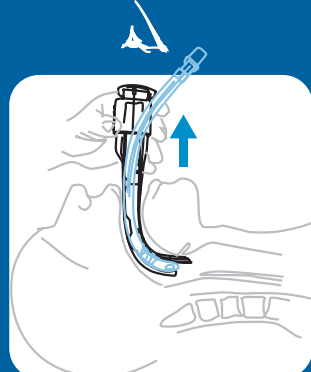
II. AIRTRAQ PLACEMENT



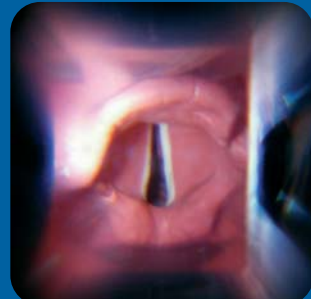
- 4 Insert the Airtraq into the midline of the patient's mouth.



- 5 Slide the Airtraq through the oropharynx and larynx, keeping it in the midline.

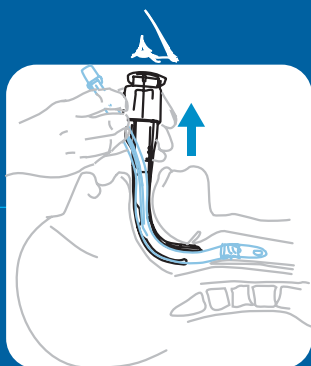


- 6 Look through the eyepiece to view the airway and to identify structures.



- 7 Place the tip of the Airtraq at the vallecula. Gently lift up the Airtraq to expose the vocal cords. Alternatively the tip can be placed under the epiglottis (Miller style).

III. ETT INSERTION

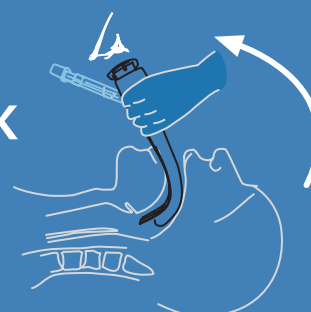


- 8 Align the center of the visual field by gently moving the tip of the Airtraq.

- 9 Advance the ETT by gently pushing it down the guiding channel until you see the ETT passing through the vocal cords.

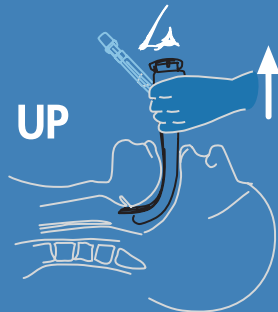
Repeat slowly the **BACK & UP** manoeuvre until vocal cords are centred in the view field:

BACK



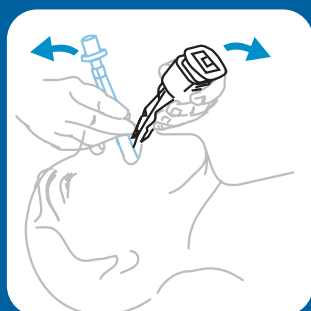
Rotate the Airtraq back, taking it away from the glottis.

UP



Gently pull the Airtraq Up.

IV. VERIFICATION, AIRTRAQ REMOVAL AND DISPOSAL



- 10 Verify ETT placement and insertion length. Inflate the ETT cuff, connect the ETT to the breathing circuit and verify placement and seal.

- 11 Separate the ETT from the Airtraq by pulling it laterally and then rotate the Airtraq backwards. Make sure to hold the ETT.

- 12 The Airtraq is designed for **SINGLE-PATIENT-USE**. Remove batteries and dispose according to standard protocols.

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AIRTRAQ BENEFITS

Single Use.

No cross-contamination risk.

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No capital or maintenance costs.

All-In-One design.

Ready to use. No set up.

Fully integrated high definition optics.

Magnified wide-angle (panoramic) view.
No need for an external monitor.

Anatomically shaped.

No Hyperextension. Less traumatic.

Guiding channel.

Easily leads ETT through vocal cords.

Built-in antifog system.

Guarantees clear view.

Simple to Use. Easy to Learn.

Improves intubation success rates,
especially with C-L grades III and IV.

Optional Wireless Video System.

Excellent for training.

APPLICATIONS

1. Anticipated difficult laryngoscopy.
2. Patients at increased risk for difficult intubation (Anaesthesia, 2008, 63, pages 182–188).
3. As a rescue following failed direct laryngoscopy (Anaesthesia, 2007, 62, 598–601).
4. Awake tracheal intubation (Anaesthesia, 2007, 62, pages 746–747).
5. Morbidly obese patients (British Journal of Anaesthesia 100 (2): 263–8 (2008)).
6. Patients with Cervical Spine Immobilization (Anesthesiology 2007; 107:53–9).
7. Patients with Infectious Diseases (Internet Journal of Airway Management).
8. Emergency Cesarean Delivery (Anesthesiology 2007; 106:629–30).
9. Assistance with tracheostomy (Anaesthesia, 2007, 62, pages 528–538).
10. Patients with coronary artery disease or arrhythmias. (Anaesthesia, 2006; 61:1093-1099).
11. Polytraumatized patients (Remi-Article No. A49. Vol 6 No. 6, June 2006 and Intensive Care Medicine Volume 6 No. 7, July 2006).
12. Emergency and Prehospital laryngoscopy (Anaesthesia, 2007, 62, pages 1061–1065; Anaesthesia, 2008, 63, pages 26–31; Emerg. Med. Journal 2007;24;509-510 doi:10.1136/emj.2006.040469).
13. Patients requiring intubation in a sitting position.
14. ETT exchange in critically ill, difficult-to-intubate patients (Journal of Clinical Anesthesia (2007) 19, 485–488).
15. Paediatric patients.
16. Placement of double-lumen endobronchial tubes (Canadian Journal of Anesthesia 54:955-957, 2007).
17. ENT patients.
18. Fibrescope and gastroscope guidance.
19. Fibrescope teaching.
20. Foreign body removal.

AIRTRAQ SIZES

DESCRIPTION AND CODE	ET TUBE SIZES	MOUTH OPENING	COLOUR
REGULAR Size 3 A-011	7.0 To 8.5	18 mm.	Blue
SMALL Size 2 A-021	6.0 To 7.5	16 mm.	Green
PAEDIATRIC Size 1 A-031	4.0 To 5.5	12.5 mm.	Purple
INFANT Size 0 A-041	2.5 to 3.5	12,5 mm.	Grey
INFANT NASAL A-051	Not Applicable	12,5 mm.	White
NASO TRACHEAL intubations A-061	Not Applicable	18 mm.	Orange
DOUBLE LUMEN Endobronchial tubes A-071	35 To 41 Fr. Left and Right Standard and Hooked	19 mm.	Yellow

ACCESSORIES

VIDEO CAMERA

The low-weight video camera allows viewing and recording when connected to any external monitor or PC. It easily clips on and off any Airtraq unit.

The camera is ideal for training and initial experience with Airtraq.

Available in PAL System (Code: A-301) and NTSC System (Code:A-302)



WIRELESS MONITOR

The Airtraq Wireless Monitor (AWM) automatically receives and displays the images from any Airtraq Video camera by Radiofrequency at 2.4 Ghz (open frequency). It also includes a charging dock station for the Airtraq camera.

The AWM works on its own rechargeable battery and has a hole pattern on its base that fits any mounting device for VESA 75/75 standard. (Code: A-333)

