







Tracheal Tubes
Airway Product Catalogue



COVIDIEN



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Is an endotracheal tube simply an endotracheal tube?

At the end of the 1980's, flexible polyvinyl chloride tubes replaced rubber tubes in the endotracheal tube market. With this change, the practice to reuse endotracheal tubes virtually disappeared.

But endotracheal tubes continue to be regarded as nothing but open lumen hoses with a cuff at one end and a connector fitted to the ventilator unit at the other. Another well-established notion is the idea that once such a device is in place and blocked, the airways are secured and safe. Long and medium-term use of these devices in intensive care medicine has shown that, at least as far as aspiration or micro aspiration are concerned, these devices do not fulfill all desirable safety criteria but promote the incidence of nosocomial pneumonia. It is not only the endotracheal tube but, among other factors, also sedation, positioning, changed microflora in the oropharyngeal cavity and the ventilator strategy used that impact on the incidence of nosocomial pneumonia in ventilated patients.

One way of decreasing the number of deaths and severely disabled persons from traffic accidents is to limit speed; the other way is to improve car safety. This simple analogy transferred to the intubated patient would mean that the time of intubation should be cut to an absolute minimum and, at the same time, that there is a need to develop tubes that reduce the typical device-associated risks.

Over the last few years, numerous efforts have been made to reduce the duration of mechanical ventilation using endotracheal tubes. Sedation and weaning protocols have been developed and used. Results show a reduction of days on the ventilator, duration of hospital stays and of the rate of nosocomial infections.

What about tube development and the safety of the device? Innovations are driven by ideas and by the availability of materials suitable for their implementation. A convincing idea may even result in the development of a new material suited to fulfill the requirements of the innovation. However, because of their apparent banality, it rarely occurred to anyone to think about improvements in endotracheal tubes.

Nevertheless, numerous modifications have been made: new materials that allow the construction of thinner cuffs with the aim of reducing the risk of micro-aspiration and different cuff shapes optimizing the tube/cuff position, thus reducing the risk of aspiration. Devices have been developed to keep the cuff pressure constant, thus avoiding pressure ulcerations of the trachea while maintaining an adequate cuff pressure and a special lumen has been established allowing intermittent or continuous supraglottic suctioning, thus providing a chance to eliminate potentially pathogenic bacteria.

Other useful modifications and innovations are possible and could be implemented. However, these modifications have two things in common: firstly, even if promising data has been reported, there is still a lack of final evidence of their effectiveness, preventing their use as "best" medical practices and, secondly, they are costly, at least more expensive than "normal" tubes.

Getting back to the analogy with traffic accidents; a safer car is more expensive and its effectiveness is clearly proven. However, this effectiveness is proven through tests with dummies and a very limited number of experiments. Nobody would require a controlled trial of car accidents with cars with and without airbags and real people inside a vehicle. This makes the difference: the effectiveness of endotracheal tubes can only be proved in practical application.

Short-term intubations for elective, well planned surgery have different risks than a tube in a poly-traumatized patient with a severe head injury and a high predictability of longer-term mechanical

ventilation and therefore the latter call for different specifications. An estimate of time and risks should be the basis for the choice of the optimum endotracheal tube for each individual patient.

No, an endotracheal tube is not simply an endotracheal tube; and companies and their employees, in close cooperation with clinicians dedicated to further developing these devices do a great job, especially as this job is primarily done behind the scenes and often goes unnoticed and, when done, still requires a lot of effort, diligence and patience to make it successful for the patients as well as for the company.

Michael Quintel
Professor of Intensive Care Medicine

Classification of tubes according to duration of use – cost-effective and beneficial for patients and hospitals

All sorts of tracheal tube designs are available. The duration that a tube can be used depends on material, cuff shape or additional functions.

High risk patients may be intubated longer than expected or acquire infections related to the intubation itself more often.

However the design of the tube (special shapes or styles) itself often serves the purpose. The cuff of the tube is the most important and sophisticated part.

In order to meet these requirements we have developed this catalogue according to the potential duration of intubation.

The indicator you see on the right side shall help you to choose the right product for the expected time of intubation.

¹ Recommendations based on internal development and design specifications. According to the Medical Device Directive classification all Mallinckrodt tracheal tubes can be used for no longer than 29 days. The recommendations we give in this catalogue are based on internal design considerations only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG

Example: our recommendation is to use the tube for intubation up to 24 hours

Short usage means that the tube is used for up to 12 hours, medium usage describes a tube used for up to 24 hours. A tube that is used for a prolonged period of time of over one day has to fulfil the highest demands on functionality and additional use.¹

By taking into account the particular prevailing conditions, tracheal tubes can be used in a way that is cost-effective as well as beneficial for the patient.

Tracheal tubes for pediatric use

Products suitable for pediatric use are identified by a small image on the side of the page for quick reference.

In addition, the relevant products are shown on a light-blue background in the tables.

EXAMPLE:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	
113-30	3.0	4.2	174	PEDIATRIC
113-35	3.5	4.8	195	
113-40	4.0	5.6	210	
113-45	4.5	6.2	232	
113-50	5.0	6.9	246	
113-55	5.5	7.6	263	
113-60	6.0	8.2	273	
113-65	6.5	8.7	285	
113-70	7.0	9.5	300	

Carton Quantity: 10

All tubes are delivered sterile packed, for single use only.

Long-Term Intubation

SealGuard™ concept

SealGuard EVAC with multifunctional connector for Luer syringes and suction tubing. Closing cap for improved hygiene.

Silent aspiration causes the most concern with regard to Ventilator Associated Pneumonia (VAP) in long-term intubated patients.

Conventional cuffs are often overinflated for appropriate tracheal sealing. SealGuard is different!

The New Generation of SealGuard with its ultra-thin cuff wall and the new tapered cuff sealing technique is designed to solve these issues. SealGuard in combination with EVAC helps to prevent early and late onset of Ventilator Associated Pneumonia.¹

With the new generation of SealGuard tracheal and tracheostomy tubes, Covidien presents an innovative solution to intubation-related complications.

The New Generation of SealGuard – a milestone for future Airway Management.

Special functional cuff design for better sealing performance.



References:
¹ Lorente L. Influence of an Endotracheal Tube with Polyurethane Cuff and Subglottic Drainage on Pneumonia. Am J Respir Crit Care Med, 2007 Sep 13

EVAC concept



One of the major causes of bronchopulmonary infections in patients undergoing long-term ventilation is aspiration from the subglottic space. Drainage of the subglottic space can significantly reduce the risk of infection in the airway during prolonged intubation. Several scientific studies have demonstrated that regular drainage of the subglottic space using the HI-LO EVAC can reduce the incidence of Nosocomial Pneumonia in the ICU during prolonged intubation by as much as 75%.

The HI-LO EVAC™ is equipped with an additional lumen for improved access to the subglottic space. The lumen is integrated into the wall of the tracheal tube ending in a dorsal opening, proximal to the cuff. It allows suctioning of the subglottic space and the simple and rapid removal of secretions from this critical area. The additional lumen can be connected to a continuous or intermittent suction device to allow automatic suctioning of the subglottic space. If you require further information regarding the use of this prevention strategy or if you should require copies of scientific studies, please contact your COVIDIEN representative.

SealGuard™ tracheal tube
Endotracheal tubes for long-term ventilation



FEATURES AND BENEFITS:

- Taper shaped cuff reduces passage of secretions.
- Lower cuff compliance allows seal at lower cuff pressures.
- Thinner and softer, but stronger than conventional PVC cuffs.²
- Shown to significantly reduce leakage with the potential to reduce VAP.¹
- Special shape of the retracted tip supports nasal intubation and ensures a high degree of patient safety and comfort.
- Murphy eye incorporated as an additional safety feature.
- Suitable for oral and nasal intubation.
- Tip-to-Tip X-ray line allows for safe positioning control.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
109850	5,0	6,9	274	20
109855	5,5	7,5	304	20
109860	6,0	8,2	317	22
109865	6,5	8,8	327	22
109870	7,0	9,6	339	26
109875	7,5	10,2	350	27
109880	8,0	10,9	360	28
109885	8,5	11,5	370	29
109890	9,0	12,1	375	31
109810	10,0	13,5	375	33

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT	MEDIUM	LONG
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1. Poelaert J, Polyurethane cuffed endotracheal tubes to prevent early postoperative pneumonia after cardiac surgery: a pilot study; J Thorac Cardiovasc Surg. 2008 Apr;135(4):771-6
2. internal bench mark testing

SealGuard™ EVAC tracheal tube
Endotracheal tube with additional lumen for improved access to and drainage of the subglottic region.



FEATURES AND BENEFITS:

- Taper shaped cuff reduces passage of secretions.
 - Lower cuff compliance allows seal at lower cuff pressures.
 - Thinner and softer, but stronger than conventional PVC cuff.
 - Shown to significantly reduce leakage with the potential to reduce VAP.¹
- The risk of respiratory infection during long-term ventilation can be considerably reduced by drainage of the subglottic region.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
<i>Nasal (suction tail close to the 15 mm connector)</i>				
124860	6,0	9	354	22
124865	6,5	9,6	366	22
124870	7,0	10,3	375	24
124875	7,5	10,9	375	26
124880	8,0	11,5	376	27
124885	8,5	12,2	376	29
124890	9,0	12,8	377	30
<i>Oral</i>				
122860	6,0	9	354	22
122865	6,5	9,6	366	22
122870	7,0	10,3	375	24
122875	7,5	10,9	375	26
122880	8,0	11,5	376	27
122885	8,5	12,2	376	29
122890	9,0	12,8	377	30

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT	MEDIUM	LONG
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- Markings at the dorsal opening allow for checking of the cuff position. Tip-to-Tip X-ray line allows for safe positioning control.
- Location of cuff and suction lines in SealGuard™ EVAC oral is more distal than nasal version.



¹ Lorente L. Influence of an Endotracheal Tube with Polyurethane Cuff and Subglottic Drainage on Pneumonia. Am J Respir Crit Care Med, 2007 Sep 13

Lanz™ System

Automatically controls and limits cuff pressure for the entire duration of intubation and ventilation



It is good practice to monitor cuff pressure to prevent tracheal complications in all patients with a cuffed tube. The Lanz™ system is designed to regulate cuff pressure automatically to help minimise the risk of mucosal damage.¹

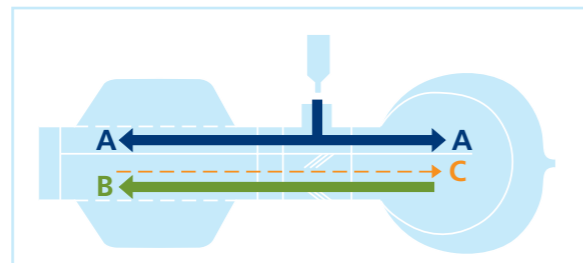
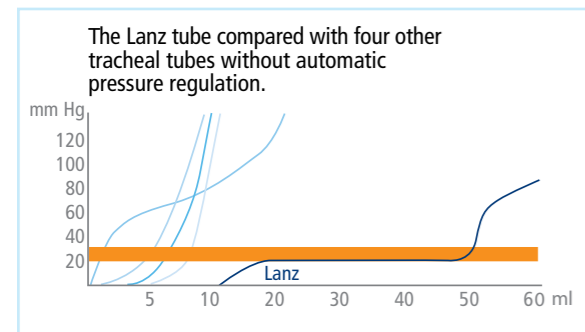
HOW DOES THE LANZ™ SYSTEM WORK?

1. A syringe is used to fill the Lanz™ system with about 40 ml of air. Following this procedure cuff pressure will reach 30 - 34 cm H₂O
2. After removing the syringe, the system automatically maintains cuff pressure below 34 cm H₂O
3. The special built-in control valve automatically regulates pressure in the cuff and the Lanz™ pilot balloon

Caution: Syringes or pressure gauges must not be connected permanently to the Lanz™ System; otherwise it will not function correctly.

FEATURES AND BENEFITS:

- The Lanz™ external pilot balloon and the adjustment valve continuously regulate cuff pressure and prevent over or under inflation.
- The external pilot balloon provides immediate visual confirmation of cuff inflation.
- The Lanz™ system eliminates manual control of tracheal tube cuff pressure (although this is always possible) if necessary.
- Maintains safe cuff pressure at different altitudes during air transport.
- The Lanz™ system is permanently bonded into the tube to avoid the risk of disconnection.



HI-LO™ tracheal tube

Tracheal tube

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG

FEATURES AND BENEFITS:

- HI-LO high volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.¹
- Specially moulded hooded tip to assist intubation and provides high patient safety and comfort.
- Murphy Eye incorporated as an additional safety feature.
- Suitable for both oral and nasal intubation.
- Tip-to-Tip X-ray line allows for safe positioning control.

HI-LO tubes are also available with the special LANZ pressure-regulating valve. The LANZ System automatically regulates intra-cuff pressure avoiding over- or under-inflation and therefore provides a safe seal of the trachea. For a detailed description, please refer to the page “LANZ System”.



ORDERING INFORMATION:

REF	REF LANZ	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
109-50	108-50	5.0	6.9	274	20
109-55	-	5.5	7.5	304	21
109-60	108-60	6.0	8.2	317	23
109-65	108-65	6.5	8.8	327	25
109-70	108-70	7.0	9.6	339	28
109-75	108-75	7.5	10.2	350	30
109-80	108-80	8.0	10.9	360	33
109-85	108-85	8.5	11.5	370	34
109-90	108-90	9.0	12.1	375	35
109-10	108-10	10.0	13.5	375	35

Carton Quantity: 10

All tubes are delivered sterile packed, for single use only.

¹ Abud TM; The Lanz endotracheal tube decreases tracheal injury in dogs; Can J Anaesth. 2005 Oct;52(8):878-82

¹ Oikkonen M.; Leakage of fluid around low-pressure tracheal tube cuffs; Anaesthesia, 1997, 52, pages 567-569

HI-LO EVAC

Tracheal tube incorporating an additional lumen for improved access and drainage of the subglottic space



RECOMMENDED USAGE TIME:



- Additional lumen integrated into the wall of the tube to allow suctioning of subglottic space.
- HI-LO high volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Specially moulded hooded tip to assist intubation and provides high patient safety and comfort.
- The X-ray opaque marker at the dorsal opening allows location and verification of the cuff position.
- Tip-to-Tip X-ray line allows for safe positioning control.

HI-LO EVAC tracheal tube is also available with the Mallinckrodt™ brand unique Lanz pressure-regulating valve as HI-LO EVAC tube with Lanz system.

The LANZ system automatically regulates intra-cuff pressure avoiding over- or under-inflation and therefore providing a safe seal of the trachea.

For a detailed description, please refer to the page “LANZ System”.

ORDERING INFORMATION:

REF oral	REF nasal	REF Lanz™ oral	REF Lanz™ nasal	I.D. (mm)	O.D. (mm)	Length incl. Connector (mm)	Cuff Ø (mm)
124-60	124060	324-60	324060	6,0	9,0	354	25
124-65	124065	–	324065	6,5	8,8	327	25
124-70	124070	324-70	324070	7,0	10,3	375	30
124-75	124075	324-75	324075	7,5	10,9	375	32
124-80	124080	324-80	324080	8,0	11,5	376	33
124-85	124085	324-85	324085	8,5	12,2	376	34
124-90	124090	324-90	324090	9,0	12,8	377	35

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.



¹ Smulders K., A Randomized Clinical Trial of Intermittent Subglottic Secretion Drainage in Patients Receiving Mechanical Ventilation; CHEST 2002; 121:858–862

EVAC ACCESSORIES: SEE P. 48



Short- and Medium-Term Intubation

OR – Standard

BRANDT™ System

Limits the rise in intra-cuff pressure caused by diffusion of nitrous oxide into the tracheal tube cuff during general anaesthesia

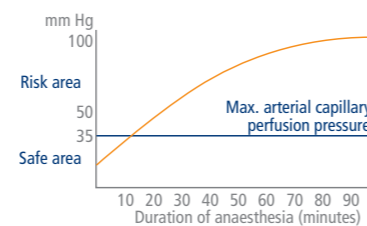


Extensive clinical studies have shown that during general anaesthesia, nitrous oxide diffuses into any air-filled tracheal tube cuff. This diffusion can cause a significant increase in cuff to tracheal wall pressure in as little as 15 minutes, which could result in damage to the delicate tracheal epithelium, tracheal wall or lead to other complications. The patented BRANDT System has been developed specifically to overcome, in a very simple and cost-effective way, the problems associated with nitrous oxide diffusion.

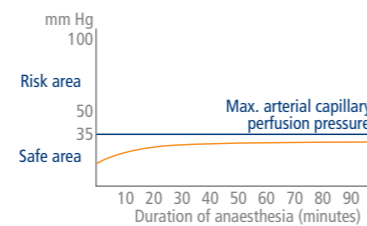
FEATURES AND BENEFITS:

- The BRANDT System (pilot balloon) allows rediffusion of nitrous oxide, which helps to maintain a low pressure cuff seal of the tracheal tube.
- The BRANDT System is available with the HI-CONTOUR™, RAE™ Oral, RAE™ Nasal and SAFETY FLEX™ tracheal tubes.

For further explanation please contact your COVIDIEN representative.



Increase in intra-cuff pressure during nitrous oxide anaesthesia, using a conventional tracheal tube, without manual correction of cuff pressure.



Minimal increase in intra-cuff pressure during nitrous oxide anaesthesia, using a BRANDT System product. Manual correction of cuff pressure is unnecessary.

Reference:
Brandt L., Reduction of nitrous oxide induced tracheal tube-cuff pressure rise during anaesthesia with the „Rediffusion System“; Scientific Edition, Mallinckrodt Medical GmbH; 1985

CURITY™ Tracheal Tubes

Standard tracheal tube

Tracheal tube and tracheal tube with high-volume low-pressure cuff for intubation during short-term intubation in OR and emergency.

FEATURES AND BENEFITS:

- CURITY cuffed tube with Luer valve and pilot balloon.
- Intubation depth marks and pre-mounted 15 mm connector.
- Tip-to-Tip X-ray line allows for safe positioning control.

ORDERING INFORMATION:

REF	Description	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)	
<i>uncuffed</i>						
9320E	2.0mm Endotracheal Tube UNCUF	2,0	2,9	130	-	PEDIATRIC
9325E	2.5mm Endotracheal Tube UNCUF	2,5	3,6	140	-	
9336E	3.0mm Endotracheal Tube UNCUF	3,0	4,2	160	-	
9335E	3.5mm Endotracheal Tube UNCUF	3,5	4,9	180	-	
9342E	4.0mm Endotracheal Tube UNCUF	4,0	5,5	200	-	
9345E	4.5mm Endotracheal Tube UNCUF	4,5	6,2	220	-	
9350E	5.0mm Endotracheal Tube UNCUF	5,0	6,8	240	-	
9360E	5.5mm Endotracheal Tube UNCUF	5,5	7,5	270	-	
9366E	6.0mm Endotracheal Tube UNCUF	6,0	8,2	280	-	
9365E	6.5mm Endotracheal Tube UNCUF	6,5	8,8	290	-	
9370E	7.0mm Endotracheal Tube UNCUF	7,0	9,6	310	-	
<i>cuffed</i>						
9430E	3.0mm Endotracheal Tube CUFD	3,0	4,2	160	8	PEDIATRIC
9440E	4.0mm Endotracheal Tube CUFD	4,0	5,5	200	11	
9450E	5.0mm Endotracheal Tube CUFD	5,0	6,8	240	16	
9555E	5.5mm Endotracheal Tube CUFD	5,5	7,5	270	17	
9460E	6.0mm Endotracheal Tube CUFD	6,0	8,2	280	22	
9465E	6.5mm Endotracheal Tube CUFD	6,5	8,8	290	22	
9570E	7.0mm Endotracheal Tube CUFD	7,0	9,6	310	25	
9475E	7.5mm Endotracheal Tube CUFD	7,5	10,2	320	25	
9480E	8.0mm Endotracheal Tube CUFD	8,0	10,9	320	27	
9485E	8.5mm Endotracheal Tube CUFD	8,5	11,5	320	27	
9590E	9.0mm Endotracheal Tube CUFD	9,0	12,1	320	29	
9495E	9.5mm Endotracheal Tube CUFD	9,5	12,8	320	29	
9500E	10.0mm Endotracheal Tube CUFD	10,0	13,5	320	32	

Length excl. 15 mm connector
Carton Quantity: 10
All tubes are delivered sterile packed, for single use only

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



OR – Standard

LO-CONTOUR™ tracheal tube

Tracheal tube

FEATURES AND BENEFITS:

- LO-CONTOUR high volume/low pressure cuffs helps to ensure efficient low pressure cuff seal.
- Thin-walled and flexible cuff to assist intubation reduce the risk of tracheal damage.
- Low profile shape of the cuff is ideally suited for nasal intubation and allows for easier visualisation of the vocal cords.
- LO-CONTOUR and LO-CONTOUR Murphy tubes are suitable for both oral and nasal intubation.
- Tip-to-Tip X-ray line allows for safe positioning control.
- LO-CONTOUR Oral allows shorter cropping of the tube.



RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



ORDERING INFORMATION:

REF	REF with Murphy Eye	REF Oral Version	I.D. (mm)	O.D. (mm)	Length incl. Connector (mm)	Cuff Ø (mm)	PEDIATRIC
300-30	301-30	-	3.0	4.3	190	6	
300-35	-	-	3.5	4.9	213	7	
300-40	301-40	-	4.0	5.6	232	8	
300-45	301-45	-	4.5	6.2	253	11	
300-50	301-50	302-50	5.0	6.9	274	18	
300-55	301-55	302-55	5.5	7.5	304	21	
300-60	301-60	302-60	6.0	8.2	317	22	
300-65	301-65	302-65	6.5	8.8	327	23	
300-70	301-70	302-70	7.0	9.6	339	25	
300-75	301-75	302-75	7.5	10.2	350	26	
300-80	301-80	302-80	8.0	10.9	360	30	
300-85	301-85	302-85	8.5	11.5	370	32	
300-90	301-90	302-90	9.0	12.1	375	33	
300-95	301-95	302-95	9.5	12.8	375	33	
300-10	301-10	302-10	10.0	13.5	375	34	

Carton Quantity: 10

All tubes are delivered sterile packed, for single use only.

OR – Standard

SATIN-SOFT LO-CONTOUR™ tracheal tube

Tracheal tube

FEATURES AND BENEFITS:

- Specially formulated softer material is particularly suitable for nasal intubation.
- Semi-transparent tubes allow direct visualisation of exhaled air (condensation).
- Specially moulded hooded tip assists nasal intubation and provides high patient safety and comfort.
- LO-CONTOUR high volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Thin-walled and flexible cuff to assist intubation and reduce the risk of tracheal damage.
- Low profile shape of the cuff is ideally suited for nasal intubation and allows for easier visualisation of the vocal cords.
- Tip-to-Tip X-ray line allows for safe positioning control.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



ORDERING INFORMATION:

REF	ID (mm)	AD (mm)	Length incl. Connector (mm)	Cuff Ø (mm)	PED.
402-50	5.0	6.9	274	18	
402-55	5.5	7.5	304	21	
402-60	6.0	8.2	317	22	
402-65	6.5	8.8	327	23	
402-70	7.0	9.6	339	25	
402-75	7.5	10.2	350	26	
402-80	8.0	10.9	360	30	
402-85	8.5	11.5	370	32	
402-90	9.0	12.1	375	33	
402-95	9.5	12.8	375	33	
402-10	10.0	13.5	375	34	

Carton Quantity: 10

All tubes are delivered sterile packed, for single use only.

OR – Standard

HI-CONTOUR™ tracheal tube

Tracheal tube

FEATURES AND BENEFITS:

- HI-CONTOUR high volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Thin-walled and flexible cuff to assist intubation and reduce the risk of tracheal damage.
- Depth marks above the cuff allow safe tube positioning (not all sizes).
- Tip-to-Tip X-ray line allows for safe positioning control.
- Murphy eye incorporated as an additional safety feature.
- Suitable for both oral and nasal intubation.

HI-CONTOUR is also available with the BRANDT System, a valve which allows rediffusion of nitrous oxide and maintains a low pressure cuff seal. For a detailed description, please refer to the page “BRANDT System”.

ORDERING INFORMATION:

REF	REF BRANDT	I.D. (mm)	O.D. (mm)	Length incl. Connector (mm)	Cuff Ø (mm)	PEDIATRIC
107-30	-	3.0	4.3	190	6	
107-35	-	3.5	4.9	213	7	
107-40	-	4.0	5.6	232	8	
107-45	-	4.5	6.2	253	11	
107-50	123-50	5.0	6.9	274	18	
107-55	123-55	5.5	7.5	304	21	
107-60	123-60	6.0	8.2	317	22	
107-65	123-65	6.5	8.8	327	23	
107-70	123-70	7.0	9.6	339	25	
107-75	123-75	7.5	10.2	350	26	
107-80	123-80	8.0	10.9	360	30	
107-85	123-85	8.5	11.5	370	32	
107-90	123-90	9.0	12.1	375	33	
107-95	123-95	9.5	12.8	375	33	
107-10	-	10.0	13.5	375	34	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



OR – Standard

CONTOUR™ tracheal tube

Uncuffed tracheal tube

FEATURES AND BENEFITS:

- Smooth bevelled and carefully moulded atraumatic hooded tip to assist intubation and to provide high patient safety and comfort.
- Graduation marks on both sides of the tracheal tube and special markings at the tip aid correct positioning.
- Tip-to-Tip X-ray line allows for safe positioning control.
- Murphy Eye incorporated as an additional safety feature.
- Suitable for both oral and nasal intubation.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length incl. Connector (mm)	PEDIATRIC
111-20	2.0	2.9	171	
111-25	2.5	3.6	171	
111-30	3.0	4.3	190	
111-35	3.5	4.9	213	
111-40	4.0	5.6	232	
111-45	4.5	6.2	253	
111-50	5.0	6.9	274	
111-55	5.5	7.5	304	
111-60	6.0	8.2	317	
111-65	6.5	8.8	327	
111-70	7.0	9.6	339	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



OR – Standard

SATIN-SOFT™ CONTOUR

Uncuffed tracheal tube

FEATURES AND BENEFITS:

- Specially formulated softer material is particularly suitable for nasal intubation.
- Semi-transparent tubes allow direct visualisation of condensation of exhaled air.
- Specially moulded hooded tip assists nasal intubation and provides highest patient safety and comfort.
- Graduation marks on both sides of the tracheal tube and special markings at the tip aid correct positioning.
- Tip-to-Tip X-ray line allows for safe positioning control.
- Murphy Eye incorporated as an additional safety feature.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	PEDIATRIC
411-25	2.5	3.6	171	
411-30	3.0	4.3	190	
411-35	3.5	5.1	213	
411-40	4.0	6.0	232	
411-45	4.5	6.5	253	
411-50	5.0	6.9	274	
411-55	5.5	7.5	304	
411-60	6.0	8.2	317	
411-65	6.5	8.8	327	
411-70	7.0	9.6	339	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM **LONG**



OR – Special

SAFETY FLEX™

Reinforced tracheal tube designed to reduce the risk of kinking when a patient's head is in an extended or flexed position

FEATURES AND BENEFITS:

- Metal reinforced spiral, uniformly and securely encapsulated in the wall of the tube helps to prevent the tube from kinking.
- High volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Two depth marks, above the cuff, aid correct positioning of the tracheal tube.
- Reinforcement supports X-ray control and verification of the tube position.
- SATIN SLIP™ inner surface of the tube facilitates easier introduction of suction catheters, fibre-optic endoscopes or intubation stylets.
- 15mm connector bonded to the tracheal tube to reduce the risk of accidental disconnection of the tube.
- Suitable for both oral and nasal intubation.
- Available with or without Murphy Eye.
- Versions with unbonded connector and with pre-mounted intubation stylet available.

ORDERING INFORMATION:

REF	REF with Murphy Eye	REF with BRANDT	REF with Stylet	REF with removable 15 mm connector	I.D. (mm)	O.D. (mm)	Length incl. Connector (mm)	Cuff Ø (mm)	PEDIATRIC
118-30	-	-	-	-	3.0	5.0	195	8	
118-35	-	-	-	-	3.5	5.2	212	9	
118-40	-	-	-	-	4.0	6.2	236	9	
118-45	-	-	-	-	4.5	6.7	250	11	
118-50	-	318-50	117050	117150	5.0	6.9	308	17	
118-55	-	318-55	117055	117155	5.5	7.5	320	19	
118-60	118-60M	318-60	117060	117160	6.0	8.2	320	21	
118-65	118-65M	318-65	117065	117165	6.5	8.8	330	22	
118-70	118-70M	318-70	117070	117170	7.0	9.6	340	24	
118-75	118-75M	318-75	117075	117175	7.5	10.2	350	26	
118-80	118-80M	318-80	117080	117180	8.0	10.8	360	28	
118-85	118-85M	318-85	117085	117185	8.5	11.5	365	29	
118-90	118-90M	318-90	117090	117190	9.0	12.1	370	31	
118-95	118-95M	318-95	-	-	9.5	12.8	370	32	

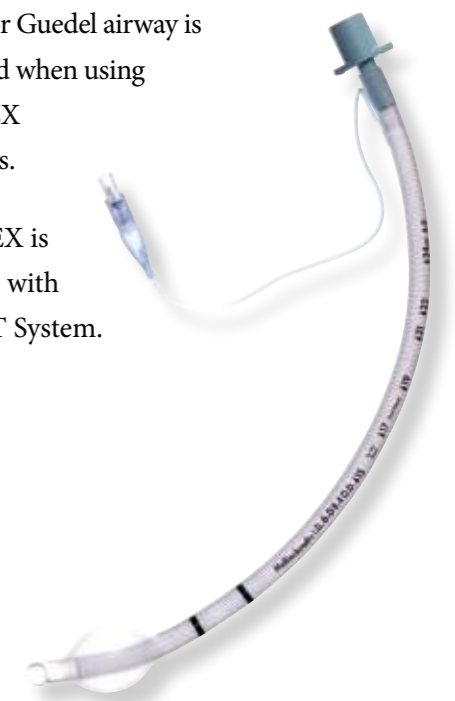
Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG

A bite block or Guedel airway is recommended when using SAFETY FLEX tracheal tubes.

SAFETY FLEX is also available with the BRANDT System.



OR – Special

SAFETY FLEX™ Extra Soft

Extra soft reinforced tracheal tube

FEATURES AND BENEFITS:

- Highly flexible silicone tube material and reinforcement within the wall of the tube provide optimal protection against kinking.
- Especially soft material helps to reduce the risk of intubation-induced damage to the tracheal mucosa.
- Marking on both sides of the tip aid in correct positioning of the tracheal tube.
- Reinforcement supports X-ray control and verification of the tube position.
- The 15 mm connector is fully inserted. Its inner taper facilitates the introduction of suction catheters.
- We recommend using a SATIN SLIP intubation stylet for easier intubation.
- Suitable for oral and nasal intubation.
- A bite block or Guedel airway is recommended when using SAFETY FLEX tracheal tubes.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	PEDIATRIC
127-25	2.5	4.0	159	
127-30	3.0	4.7	179	
127-35	3.5	5.3	202	
127-40	4.0	6.0	222	
127-45	4.5	6.7	242	
127-50	5.0	7.3	262	
127-55	5.5	8.0	294	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

OR – Special

SAFETY FLEX™ Uncuffed

Reinforced tracheal tube designed to reduce the risk of kinking when a patient's head is in an extended or flexed position

FEATURES AND BENEFITS:

- Metal reinforced spiral, uniformly and securely encapsulated in the wall of the tube, helps to prevent the tube from kinking.
- Tip marking aids in correct positioning of the tracheal tube if the vocal cords can be visualised.
- Reinforcement supports X-ray control and verification of the tube position.
- 15 mm connector bonded to the tracheal tube to reduce the risk of accidental disconnection of the tube.
- Suitable for both oral and nasal intubation.
- A bite block or Guedel airway is recommended when using SAFETY FLEX tracheal tubes.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	PEDIATRIC
127-30-2	3.0	5.0	192	
127-35-2	3.5	5.2	212	
127-40-2	4.0	6.2	232	
127-45-2	4.5	6.7	252	
127-50-2	5.0	6.9	290	
127-55-2	5.5	7.5	298	
127-60-2	6.0	8.2	308	
127-65-2	6.5	8.8	318	
127-70-2	7.0	9.6	328	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



RAE™ Oral and Nasal

Preformed tracheal tube

FEATURES AND BENEFITS:

- Preformed tube helps to reduce the risk of kinking.
- Improved access to the operative field, because the connections lie outside this area.
- High volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Specially moulded hooded tip to assist intubation and to help to provide high patient safety and comfort.
- Murphy Eye incorporated as an additional safety feature.
- Tip-to-Tip X-ray line allows for safe positioning control.

RAE tubes are also available with the BRANDT System.

RAE - developed by Drs Ring, Adair and Elwyn

ORDERING INFORMATION:

REF	REF with BRANDT	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)	
Oral						
115-40	315-40	4.0	5.6	216	8	PEDIATRIC
115-45	315-45	4.5	6.2	237	11	
115-50	315-50	5.0	6.9	251	19	
115-55	315-55	5.5	7.6	263	21	
115-60	315-60	6.0	8.2	287	22	
115-65	315-65	6.5	8.7	297	24	
115-70	315-70	7.0	9.5	317	28	
115-75	315-75	7.5	10.1	327	30	
115-80	315-80	8.0	10.8	345	31	
115-85	315-85	8.5	11.1	355	33	
115-90	315-90	9.0	11.9	374	34	
Nasal						
119-60	319-60	6.0	8.2	386	22	
119-65	319-65	6.5	8.7	396	24	
119-70	319-70	7.0	9.5	406	28	
119-75	319-75	7.5	10.1	416	30	
119-80	319-80	8.0	10.8	425	31	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



RAE™ Oral and Nasal uncuffed

Preformed tracheal tubes

FEATURES AND BENEFITS:

- Preformed tube helps to reduce the risk of kinking.
- Improved access to the operative field, as the connections lie outside this area.
- Two distal eyes incorporated as an additional safety feature.
- Tip-to-Tip X-ray line allows for safe positioning control.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	
113-30	3.0	4.2	174	PEDIATRIC
113-35	3.5	4.8	195	
113-40	4.0	5.6	210	
113-45	4.5	6.2	232	
113-50	5.0	6.9	246	
113-55	5.5	7.6	263	
113-60	6.0	8.2	273	
113-65	6.5	8.7	285	
113-70	7.0	9.5	300	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

REF	I.D. (mm)	O.D. (mm)	Length (mm)	
114-30	3.0	4.2	190	PEDIATRIC
114-35	3.5	4.8	220	
114-40	4.0	5.6	240	
114-45	4.5	6.2	272	
114-50	5.0	6.9	286	
114-55	5.5	7.6	293	
114-60	6.0	8.2	303	
114-65	6.5	8.7	310	
114-70	7.0	9.5	315	

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



Satin RAE™

Preformed Tracheal Tube – Nasal

FEATURES

- Soft preformed tracheal tube with thin walled high-volume low pressure cuff.
- Specially formulated softer material is particularly suitable for nasal intubation.
- Tip-to-Tip X-ray line allows for safe positioning control.
- Two circular depth marks above the cuff for safe positioning.
- Double bended for nasal intubation only.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Tube Length (tip to nares mark) (cm)	Cuff Ø (mm)
119760	6.0	8.8	28	24
119765	6.5	9.4	29	28
119770	7.0	10.2	30	30
119775	7.5	10.9	31	31
119780	8.0	11.6	32	32

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:



MLT™ tracheal tube

Tracheal tube for microlaryngeal surgery

FEATURES AND BENEFITS:

- Small diameter tube provides maximum access to the operative field.
- Length and cuff diameter comparable to a standard tube with 8 mm internal diameter.
- Special high volume/low pressure cuff to give maximum tracheal wall protection.
- Murphy Eye incorporated as an additional safety feature.
- Suitable for both oral and nasal intubation.
- Tip-to-Tip X-ray line allows for safe positioning control.

The MLT tube is not suitable for laser surgery..

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length with Connector (mm)	Cuff Ø (mm)
121-40	4.0	5.6	368	25
121-50	5.0	6.9	368	27
121-60	6.0	8.2	368	27

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:



LGT™ laryngectomy tube

Preformed laryngectomy tube for use during operations on the larynx or trachea, when a tracheal tube is contra-indicated

FEATURES AND BENEFITS:

- Two preformed curves separated by a short straight section facilitate tube placement, regardless of the tracheal shape.
- Intubation is performed through a tracheostomy stoma.
- Anaesthesia circuit connections are removed from the surgical field.
- High volume/low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Specially moulded hooded tip to assist intubation and helping to provide high patient safety and comfort.
- Murphy Eye incorporated as an additional safety feature.
- Tip-to-Tip X-ray line allows for safe positioning control.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
129-70	7.0	9.5	358	28
129-80	8.0	10.8	358	31

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



LASER-FLEX™ Cuffed / Uncuffed

Stainless steel dual cuffed and uncuffed tube for ventilation during CO₂ and KTP laser surgery of the laryngeal / tracheal area

FEATURES AND BENEFITS:

- Laser-resistant, non-flammable, flexible stainless steel tube.
- Accidental contact of the tube shaft with the laser beam results in the reflection of a defocused beam.
- Airtight steel spiral prevents air leaks occurring along the tube's length.
- 15 mm connector bonded to the tracheal tube to reduce the risk of accidental disconnection of the tube.

FEATURES AND BENEFITS LASER-FLEX CUFFED:

- Dual cuffs of extra large diameter and individual inflation lines for maximum safety.
- The pilot balloons with self-sealing valves are clearly marked “proximal” and “distal”.
- Murphy Eye incorporated in a soft atraumatic tip as an additional safety feature.

For adequate protection during laser surgery, both cuffs must be filled with isotonic saline.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)
Cuffed			
160-45	4.5	7.0	349
160-50	5.0	7.5	349
160-55	5.5	7.9	349
160-60	6.0	8.5	349

Carton Quantity: 1
All tubes are delivered sterile packed, for single use only.

REF	I.D. (mm)	O.D. (mm)	Length (mm)	PED.
Uncuffed				
161-30	3.0	5.2	238	
161-35	3.5	5.7	238	
161-40	4.0	6.1	238	

Carton Quantity: 1
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



OR – Endobronchial

Bronco-Cath™ with Polyurethane Cuff

New endobronchial tube, with thin and robust tracheal cuff made of polyurethane to prevent cuff rupture

Stronger PU tracheal cuff

FEATURES AND BENEFITS:

- The polyurethane cuff material shows a much higher puncture strengths than conventional materials¹. Intubation related cuff damages by teeth or anatomical structures may be reduced at a minimum.
- S-shaped bronchial cuff provides an increased margin of safety when positioning the Bronco-Cath™ Right in front of the right superior pulmonary lobe.
- Slightly curved bronchial tube tip of Bronco-Cath™ Left helps to improve placement in the left main bronchus.
- Blue colour-coded bronchial cuff, bronchial proximal lumen and bronchial pilot balloon for easy identification.

- Rectangular distal tip reduces partial occlusion of the bronchial tip.
- X-ray opaque markers at the distal tip, around the side eye, above the bronchial cuff and at the tracheal opening aid location and verification of tube position.
- With mandrin for easier intubation.

¹ Internal bench testing

ORDERING INFORMATION:

REF Standard	REF with CPAP system	REF with carinal hook	REF Pack w. 5 wo. accessories	I.D. in mm *1	O.D. in mm	O.D. in Ch	Length in mm
Right							
126035	126135	-	126535	4,8	11,7	35	420
126037	126137	-	126537	5,1	12,3	37	420
126039	126139	-	126539	5,3	13,0	39	420
126041	126141	-	126541	5,4	3,7	41	420
Left							
125028	125128	-	125528	3,1	9,3	28	420
125032	125132	-	125532	3,4	10,7	32	420
125035	125135	125235	125535	4,8	11,7	35	420
125037	125137	125237	125537	5,1	12,3	37	420
125039	125139	125239	125539	5,3	13,0	39	420
125041	125141	125241	125541	5,4	13,7	41	420

Accessories: Contains REF 125-10 and 2 extra long Gentle-Flo™ suction catheters

*1 Applicable limit when using a fibre-optic bronchoscope

RECOMMENDED USAGE TIME:

SHORT	MEDIUM	LONG
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OR – Endobronchial

Bronco-Cath™ Left – Tracheal PVC cuff

For left-sided endobronchial intubation when differential or one-lung ventilation is indicated during thoracic surgery or intensive care.

RECOMMENDED USAGE TIME:

SHORT	MEDIUM	LONG
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FEATURES AND BENEFITS:

- Low pressure tracheal and bronchial cuffs help minimise the risk of mucosal damage.
- The special design of the bronchial cuff assists in location of the distal tip when verification is confirmed by the fibre-optic bronchoscope.
- The blue-coloured bronchial cuff assists in identification of the distal tip when verifying correct placement by a fibre-optic bronchoscope.
- Slightly curved bronchial tube tip helps to improve placement in the left main bronchus.
- X-ray opaque markers at the distal tip, above the bronchial cuff and at the tracheal opening aid location and verification of the tube position.
- The accessory pack contains 2 Opti-Port™ connectors, 2 Gentle-Flo™ endobronchial suction catheters and 1 “Y” connector.
- Also available with X-ray opaque carinal hook for precise location of the Bronco-Cath within the carina.



ORDERING INFORMATION:

REF	REF Carina Hook	REF 5-Pack ¹	I.D. (mm) ²	O.D. (mm)	Length (mm)
125-28	-	-	3.1	9.3	420
125-32	-	-	3.4	10.7	420
125-35	125-35-1	125-35-5	4.8	11.7	420
125-37	125-37-1	125-37-5	5.1	12.3	420
125-39	125-39-1	125-39-5	5.3	13.0	420
125-41	125-41-1	125-41-5	5.4	13.7	420

Carton Quantity: 1

¹ Carton Quantity 5-Pack: 5, without accessories.

² Limiting inner diameter to be considered when using a fibre-optic bronchoscope.

All tubes are sterile packed, for single use only.

OR – Endobronchial

Bronco-Cath™ Right – Tracheal PVC cuff

For right-sided endobronchial intubation when differential or one-lung ventilation is indicated during thoracic surgery or intensive care.

FEATURES AND BENEFITS:

- Low pressure tracheal and bronchial cuffs help minimise the risk of mucosal damage.
- Blue colour-coded bronchial cuff, bronchial proximal lumen and bronchial pilot balloon for easy identification.
- Special “S” shaped bronchial cuff provides an increased margin of safety when positioning the Bronco-Cath in the proximity of the right upper lobe.
- The blue-coloured bronchial cuff assists in identification of the distal tip when verifying correct placement by a fibre-optic bronchoscope.
- X-ray opaque markers at the distal tip, around the side eye, above the bronchial cuff and at the tracheal opening aid location and verification of the tube position.
- The accessory pack contains 2 Opti-Port™ connectors, 2 Gentle-Flo™ endobronchial suction catheters and 1 “Y” connector.

ORDERING INFORMATION:

REF	REF 5-Pack ¹	I.D. (mm) ²	O.D. (mm)	Length with Connector (mm)
126-35	126-35-5	4.8	11.7	420
126-37	126-37-5	5.1	12.3	420
126-39	126-39-5	5.3	13.0	420
126-41	126-41-5	5.4	13.7	420

Carton Quantity: 1

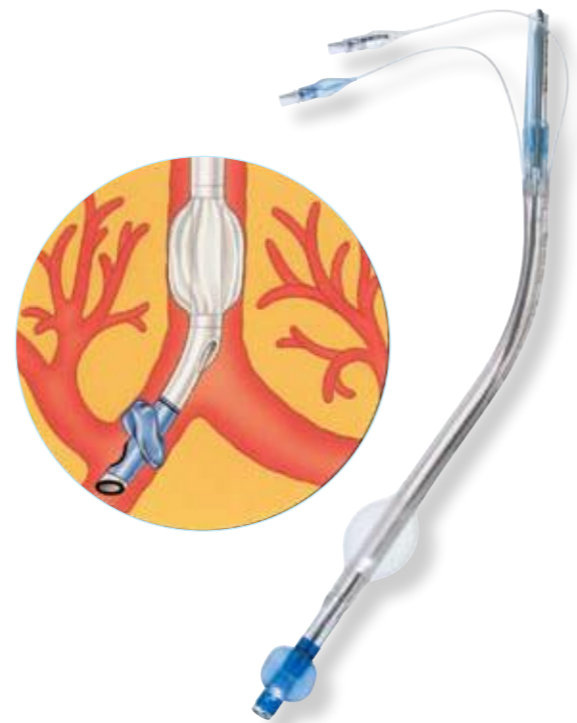
¹ Carton Quantity 5-Pack: 5, without accessories

² Limiting inner diameter to be considered when using a fibre-optic bronchoscope.

All tubes are sterile packed, for single use only

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



OR – Endobronchial

Bronco-Cath™ Accessory Pack**FEATURES AND BENEFITS:**

- Free moving right-angled swivel connector allows safe connection and reduces risk of dislocation of Bronco-Cath tubes.
- Facilitates use of fibre-optic instruments and insertion of suction catheters (e.g. Gentle-Flo™).

CPAP¹ System

To avoid or treat hypoxaemia during one-lung anaesthesia.

FEATURES AND BENEFITS:

- Patented CPAP valve allows exact adjustment of pressure levels from 1 to 10 cm H₂O.
- Breathing bag aids opening of the alveoli.
- Right-angled double swivel connector allows easy attachment to the Bronco-Cath endobronchial tube.
- Kink resistant oxygen tubing reduces the risk of occlusion.
- The lightweight system reduces unnecessary force on the proximal end of the Bronco-Cath endobronchial tube, minimising the risk of disconnection.
- Compact and easy to use, even when space is confined.
- Latex-free.

ORDERING INFORMATION:

REF	Carton / Quantity
125-20	5

¹ The CPAP valve is licensed from Dr. David Alfery.

Accessory Pack:

Content: 2 Opti-Port™ connectors, 2 extra long Gentle-Flo™ suction catheters, 1 y- connector
The accessory pack is included in the single packs of all Bronco-Cath™

ORDERING INFORMATION:

REF	Description	Carton / Quantity
125-10	Bronco-Cath Accessory Pack	10



¹ The CPAP valve is licensed from Dr. David Alfery.



Difficult Airway and Emergency

COMBITUBE™

Esophageal/Tracheal Double Lumen Airway

When a difficult airway must be established, time and accuracy are critical. Now you can be assured of rapid intubation and effective ventilation with the COMBITUBE airway. Unlike traditional endotracheal tubes, the COMBITUBE airway is designed to establish a nonsurgical patient airway when placed into either the trachea or the esophagus.

FEATURES AND BENEFITS:

- Special double-lumen design allows for rapid establishment of an effective airway through either esophageal or tracheal placement.
- Blind placement eliminates the need for laryngoscope.
- Pharyngeal balloon inflates to hold device firmly in place and helps prevent the escape of gas through the nose or mouth.
- Full-length lumen allows for suctioning of gastric contents with no interruption of patient ventilation should the COMBITUBE airway be placed in the esophagus.
- Esophageal cuff inflates to seal the esophagus so that gas does not enter the stomach and gastric contents are not aspirated.
- Appropriate for pre-hospital, surgical and emergency use.
- Tip-to-Tip X-ray line allows for safe positioning control.

ORDERING INFORMATION:

REF	Description	Size (Fr)	Quantity / box
5-18537	COMBITUBE Standard Trays	37	4
5-18541	COMBITUBE Standard Trays	41	4
5-18237	COMBITUBE Singles	37	4
5-18241	COMBITUBE Singles	41	4
5-18437	COMBITUBE Roll-Ups	37	4
5-18441	COMBITUBE Roll-Ups	41	4
5-18141	COMBITUBE Demonstration Airway	41	1

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



Oxford

Preformed tracheal tube

FEATURES AND BENEFITS:

- The bevelled tip (aligned to the posterior wall) facilitates rapid access to the trachea in emergency situations.
- Right angled tube shape reduces the risk of kinking in the oropharynx.
- High-volume/low pressure cuffs helps to ensure an efficient low pressure cuff seal.
- 15 mm connector bonded to the tracheal tube to reduce the risk of accidental disconnection of the tube.
- Tip-to-Tip X-ray line allows for safe positioning control.
- Suitable for oral intubation.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
128-60	6.0	8.2	216	21
128-70	7.0	9.5	231	24
128-80	8.0	10.8	241	27
128-90	9.0	11.9	251	30
128-10	10.0	13.4	266	33

Carton Quantity: 10
All tubes are delivered sterile packed, for single use only.

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



Endotrol™ tracheal tube

Tracheal Tube with Controllable Tip

HI-LO™ tracheal tube with directional distal tip control for fast, easy intubation.

For use during emergency situations when the intubating pathway is abnormal or in blind nasal intubations.

FEATURES AND BENEFITS:

- High-volume low-pressure cuff helps to ensure an efficient low pressure cuff seal.
- Directable tip helps positioning in most difficult airway situations.
- Specially moulded hooded tip to assist intubation and provides high patient safety and comfort.
- Tip-to-Tip X-ray line allows for safe positioning control.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
86349	6.0	8.2	317	23
86351	7.0	9.6	339	28
86353	8.0	10.9	360	33
86355	9.0	12.1	375	35

Carton Quantity: 10

All tubes are delivered sterile packed, for single use only

available soon

RECOMMENDED USAGE TIME:

SHORT MEDIUM LONG



[Accessories]

DAR™ Guedel Airway

sterile & ready for use

FEATURES AND BENEFITS:

- Bite block for oral intubation.
- Anatomical shape.
- Colour-coded.

ORDERING INFORMATION:

REF	Size	Length (mm)*	Colour code
<i>sterile</i>			
287/7839	000	30	pink
287/7838	00	40	orange
287/7636	0	50	blue
287/7635	1	60	violet
287/7634	2	70	white
287/7633	3	80	green
287/7632	4	90	yellow
287/7631	5	100	red
287/7843	6	110	light green
<i>clean packed</i>			
287P7839SP	000	30	pink
287P7838SP	00	40	orange
287P7636SP	0	50	blue
287P7635SP	1	60	violet
287P7634SP	2	70	white
287P7633SP	3	80	green
287P7632SP	4	90	yellow
287P7631SP	5	100	red
287P7843SP	6	110	light green

* Axial measurement from underside of proximal end to centre of distal opening

Carton Quantity: 10, single packed

DAR™ Guedel Airway

resterilisable

FEATURES AND BENEFITS:

- Opaque soft Latex free material.
- Bite block for oral intubation.
- Anatomical shape.
- Ready for use.
- Colour-coded.

ORDERING INFORMATION:

REF	Size	Length (mm)*	Colour code
287/25000	000	30	pink
287/25001	00	40	orange
287/25002	0	50	blue
287/25003	1	60	violet
287/25004	2	70	white
287/25005	3	80	green
287/25006	4	90	yellow
287/25007	5	100	red
287/25008	6	110	light green

* Axial measurement from the underside of proximal end to the centre of the distal opening

Carton Quantity: 10
single packed, ready for use



DAR™ Guedel Airway

Sterile, ready for use without colourcode

FEATURES AND BENEFITS:

- Opaque soft Latex free material.
- Bite block for oral intubation.
- Anatomical shape.
- Ready for use.

ORDERING INFORMATION:

REF	Size	Length (mm)*	Colour code
287/25018	0	30	
287/25017	0	40	
287/25016	0	50	
287/25015	1	60	
287/25014	2	70	
287/25013	3	80	
287/25012	4	90	
287/25011	5	100	
287/25010	6	110	

* Axial measurement from the underside of proximal end to the centre of the distal opening

Carton Quantity: 10
single packed, ready for use

Nasopharyngeal Airways

FEATURES AND BENEFITS:

- Soft material.
- Anatomically designed.
- Glide-Text™ serrations inside airway.
- Slide-Text™ exterior finish.
- Thin-wall construction.
- Sterile.

ORDERING INFORMATION:

REF	I.D. (mm)	O.D. (Fr)	O.D. (mm)	Length (mm)
8888247023	6,5	26	8,7	114
8888247031	7,0	28	9,3	127
8888247049	7,5	30	10,0	140
8888247056	8,0	32	10,7	152
8888247064	8,5	34	11,3	159

Carton Quantity: 10
sterile, single packed





SATIN SLIP

Intubation Stylet

FEATURES AND BENEFITS:

- Malleable aluminium with a smooth plastic sheath assists in tracheal intubation under difficult circumstances.
- Soft distal tip to reduce the possibility of intubation damage.
- SATIN SLIP surface for easier introduction and removal of the stylet.
- Packed clean, for single use only.
- Also available sterile.

ORDERING INFORMATION:

REF	Recommended Tube I.D. (mm)	Length (mm)	
<i>SATIN SLIP clean packed</i>			
116-06	2.5 to 4.5	280	PED.
116-10	4.0 to 6.0	350	
116-14	> 5.0	350	
<i>SATIN SLIP sterile, single packed</i>			
116-06-S	2.5 to 4.5	280	PED.
116-10-S	4.0 to 6.0	350	
116-14-S	> 5.0	350	

Carton Quantity: 10

Tracheal Tube Restraint

FEATURES AND BENEFITS:

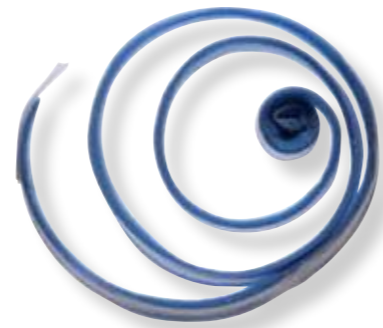
- Stabilises orally and nasally intubated tracheal tubes without adhesive tape.
- One size fits all tracheal tubes.
- Made from Velfoam™* to reduce skin irritation.
- Laminated with Velcro™* for easy and rapid adjustment.
- Packed clean, for single use only.

ORDERING INFORMATION:

REF Tracheal Tube Restraint	Length (mm)
330	700

Carton Quantity: 25

™* trademarks of Velcro Industries B.V.



RADSC

Right Angled Double Swivel Connector

FEATURES AND BENEFITS:

- Lightweight free-moving connector with two swivel joints. Reduces the risk of trauma and/or tube displacement by minimising the pull and torque on the tracheal or tracheostomy tube.
- Small removable cap allows suctioning and bronchoscopy and minimises air leakage.

ORDERING INFORMATION:

REF RADSC	Carton / Quantity
104-13	10

Sterile, single packed. Single use only



HI-LO Hand Pressure Gauge

FEATURES AND BENEFITS:

- Convenient, ergonomic design.
- Calibrated in cm H₂O.
- Fitted with clip attachment for storage and quick access.
- Each unit is supplied with a detachable, long flexible connecting tube.
- An extension tube is also available, separately packed, ready for use.

ORDERING INFORMATION:

REF	Description	Carton / Quantity
109-02	HI-LO Hand Pressure Gauge	1
109-05	Connecting Tube	10



Free-Flow

Clogging remover for tracheal tubes and tracheostomy tubes

FEATURES AND BENEFITS:

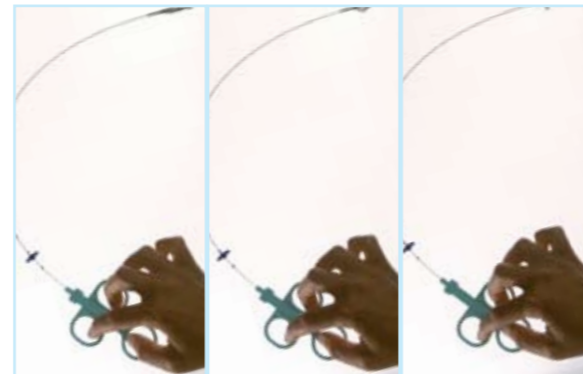
- Easy to use tool for removal of clogging and incrustations from inner lumen of tracheal tubes.
- Fast restoring of airway in case of obstruction with secretion which cannot be eliminated by regular suctioning.
- Avoids re-intubation and the related additional risks.
- Routinely used, it can prevent the formation of crusted secretions and avoids gradual lumen reduction.
- Available for use with tubes with inner diameter from 6 to 9.5 mm.



ORDERING INFORMATION:

REF	Description	Length of use	Unit of sales
111/1115	Free-Flow for tracheal tubes	41 cm	5
111/1118	Free-Flow for tracheostomy tubes	24 cm	5

Delivered single and sterile packed. For single use only



EASYCAP II/PEDICAP

CO₂ Detectors

For years, hospital and emergency medical services clinicians have relied on Nellcor™ Easy Cap™ II and Pedi-Cap™ CO₂ Detectors to verify proper ET tube placement. These CO₂ detectors assure you that your patient is intubated properly right from the start – and remains that way during transport.

It's easy to see why Easy Cap II is a leader. Easy Cap II, with its familiar purple-to-yellow color scheme, has become synonymous with colorimetric CO₂ detection. Nellcor Easy Cap II and Pedi-Cap CO₂ Detectors give you an easy, economical way to assess exhaled CO₂ during airway management. Whether you're intubating patients in the ER, the ICU or the field, choose reliable technology from a name you trust.



FEATURES AND BENEFITS:

- Attach directly to ET tube to indicate exhaled CO₂ levels during intubation for up to 2 hours.
- Respond quickly to exhaled CO₂ with a simple color change from purple to yellow.
- Feature an easy-to-see display window that provides constant visual feedback with breath-to-breath response.
- Aid assessment of CPR effectiveness.

ORDERING INFORMATION:

Part Number	Description	Recommended patient size: Weight (kg)	Internal volume (cc)	Resistance to flow	Detector weight (g)	Connector ports		Usage time (hours)
						Patient end (mm)	Circuit end (mm)	
EASYCAPII PEDICAP	Case of 24	over 15	25	3.0 cm H ₂ O ± 1.0 cm 60 L/min flow	Less than 20 g	22 OD/15 ID	15 OD/13 ID	Up to 2 hours
EASYCAPII6 PEDICAP6	Case of 6	1 to 15	3	2.5 cm H ₂ O ± 0.5 cm 10 L/min flow	Less than 5 g	18 OD/15 ID	15 OD/5 ID	Up to 2 hours

EVAC Suction Pump

Suction pump for intermittent and continuous suctioning for supraglottic drainage

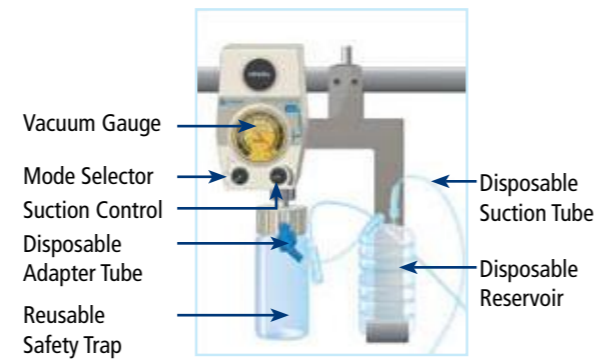
For use on vacuum source

Intermittent Suctioning – Regulator assembly

The set contains a full set including the reusable pump either for pole or rail mount, 5 disposable reservoirs and all connection tubes.

The connection tubes and adapter for your local vacuum source is not included.

Please consider to reorder after first use the necessary replacement for the disposable components parts.



ORDERING INFORMATION:

REF	Description	Packing unit
403/10182	EVAC vacuum pump for rail mount	1
403/10183	EVAC vacuum pump pole mount	1
403/10179	EVAC reservoir bottle disposable	10
403/10180	EVAC suction tube 1.00 m	10
403/10185	EVAC suction tube 1.50 m	10
403/10181	EVAC adapter tube for reservoir	10

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