

A. Introduction

The Airtraq SP is a single-patient, ready-to-use visual laryngoscope that is designed to facilitate intubation. The Airtraq SP allows for full visualization of the airway during 100% of the course of intubation. It does not require for the patient's neck to be hyperextended, permitting for intubation of patients in virtually any position encountered. The visualization can be performed directly through the eyecup or connecting it to the Airtraq A-390 Wi-Fi Camera that may be attached to the device for video laryngoscopy.

Sizes

- Regular: A-011/ATQ-011 Blue
For use with ETT 7.0 – 8.5
- Pediatric: A-031/ATQ-031
For use with ETT 4.0 – 5.5



B. Procedure

EMR/BLS

Preparation and Test

1. Airway Management Protocol 7. Provide assisted ventilations via BVM to hyperoxygenate the patient and attach ETCO2 filter line Procedure 11.
2. Select the appropriate size Airtraq SP according to the size of ETT to be inserted.
3. Press the orange switch that is located below the battery cover to turn on the light.
4. After 30 seconds, ensure that the light is steady. When the light remains steady, the anti-fog system is fully activated.

NOTE: If the light automatically turns off or does not remain steady, the unit has become defective and must not be used.

5. If using the A-390 Wi-Fi Camera, simply pull the eyecup from the Airtraq SP to remove and replace with the camera by inserting at the proximal end until fully seated.
6. Inflate and check the distal cuff of the ETT for leaks and punctures, deflate and remove stylet.
7. Lubricate the ETT and place into the lateral channel of the Airtraq SP without contact to the lens.
8. Align the tip of the ETT with the end of the lateral channel of the Airtraq SP.

ALS**Airtraq SP Placement**

9. Insert the Airtraq SP into the midline of the patient's mouth. Take special care to avoid pushing the tongue inside the oropharynx.
10. Before it reaches the vertical plane, begin to look and identify the airway structures.
11. Continue the insertion until the epiglottis is identified. Place the tip of the Airtraq SP in the vallecula.
 - a) Alternatively, the tip can be placed under the epiglottis, lifting it out of the way.
12. Gently lift the Airtraq SP to expose the vocal cords.

ETT Insertion

13. Align the vocal cords in the center of the visual field by gently moving the tip of the Airtraq SP as necessary.
14. Gently advance the ETT inside the channel and check the depth of insertion.
15. Inflate the ETT cuff as performed normally and check for proper positioning.
16. Separate the ETT from the Airtraq SP blade by pulling it laterally or to the side of the mouth, while manually holding the ETT in its position.
17. Remove the Airtraq SP from the patient's airway following the midline.
18. Confirm proper placement of the ETT and attach ETCO₂ filter line.
19. Secure ETT with commercially available tube securing device.

C. Video Laryngoscopy – A-390 Wi-Fi Camera

Mounting the A-390 Wi-Fi Camera onto the Airtraq SP

1. Remove the eyecup from the Airtraq SP by simply pulling the eyecup to remove and replace with the camera by inserting at the proximal end until fully seated.



Turning the Camera On/Operation

2. The A-390 camera will automatically turn on and start in “live video” mode once securely inserted into Airtraq SP blade. Boot up process takes approximately 3 seconds.
 - a. Camera can be manually powered on by pressing the automatic power button.
3. If during intubation, the camera accidentally becomes dislodged from the Airtraq SP blade, a warning message will appear on the screen indicating “blade detached.”
 - a. If the blade is accidentally detached while recording video, if reattached within (5) seconds back on the blade securely, the recording will automatically restart and saved under the same video file.
4. Press the action icons on the screen to select an action. Touch panel works when icons are depressed using gloves.
5. When in live video, pressing the ‘back’ icon on the screen will make the camera return to the main menu.

A-390 Battery Charge and Charge Status Check

The A-390 can operate for 240 minutes when Wi-Fi is deactivated and for 180 minutes when Wi-Fi is activated. A complete recharge takes approximately 110 minutes. Without use, the battery will discharge at a rate of less than 2% per day. If the A-390 can be turned on and low on battery, there will still be a minimum of a 10-minute operating time guaranteed.

1. When the A-390 is turned on, the battery charge status icon and available minutes of operating time will appear on the screen.
2. If charging is necessary, connect the camera via the USB cable directly to a power source.
3. Once connected to a power source to begin charging, the A-390 will automatically shut off.

NOTE: The A-390 does not work when it is being charged.

D. Usage Tips for Success

1. Initial experience should be gained in non-difficult airways.
2. Insert the Airtraq SP, avoiding the tongue, and slide it softly and slowly.
3. Keep the Airtraq SP in the mouth's midline.
4. Look into eyecup or camera before the Airtraq SP gets to the vertical plane.
5. Once the tip is located at the epiglottis, either at the vallecula (Macintosh Method), or under the epiglottis (Miller Method), gently lift up the Airtraq SP (do NOT tilt or use a lever action).
6. Advance the ETT slowly and do not insert too deep.
7. If needed rotate the ETT inside the channel by twisting the Airtraq to center the vocal cords/glottis.