

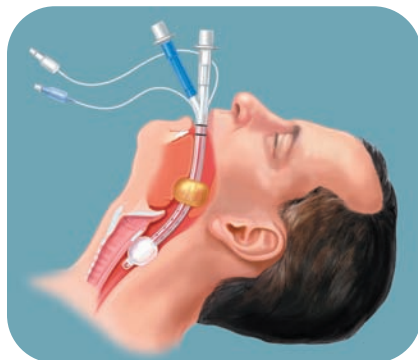
# Combitube®

## ESOPHAGEAL/TRACHEAL DOUBLE-LUMEN AIRWAY

### Rapid intubation of difficult airways.

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*® esophageal/tracheal double-lumen airway from Nellcor.

Unlike traditional endotracheal tubes, the *Combitube* airway is designed to establish a nonsurgical patent airway when placed into either the trachea or the esophagus.



**Unique double-lumen design allows for rapid airway establishment through either esophageal or tracheal placement.**

Blind placement eliminates the need for laryngoscope.

**Pharyngeal balloon holds 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 ventilation in the event the *Combitube* airway is placed in the esophagus.

**Esophageal cuff inflates to seal the esophagus so gas does not enter the stomach and gastric contents are not aspirated.**

Appropriate for prehospital, surgical and emergency use.

# Combitube®

## ESOPHAGEAL/TRACHEAL DOUBLE-LUMEN AIRWAY

### Step 1

- Place the patient's head in neutral position.
- Open the mouth and depress tongue.

### Step 2

- Insert the *Combitube* flat along the tongue.
- Continue until the patient's front teeth are aligned between the depth marks.

### Step 3

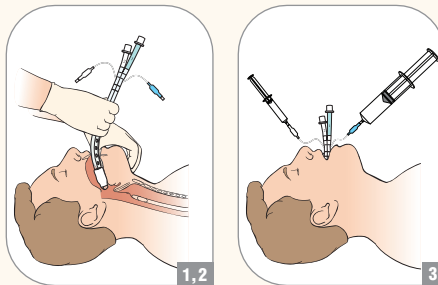
- First, use the large syringe to inflate the blue pilot balloon for the large oropharyngeal cuff. Inflate to 85 mL (37 Fr) or 100 mL (41 Fr).
- Then, use the smaller syringe to inflate the white pilot balloon for the distal cuff. Inflate to 12 mL (37 Fr) or 15 mL (41 Fr).
- During inflation, the *Combitube* airway might move slightly out of the patient's mouth due to the self-adjusting property of the oropharyngeal balloon.

### Step 4

- Assume esophageal positioning.
- Attach ventilating device to the longer, blue connecting tube.
- If auscultation of breath sounds is positive, continue ventilation. Confirm tracheal ventilation with end-tidal CO<sub>2</sub> detection.
- Use the shorter, clear connecting tube for gastric suctioning.

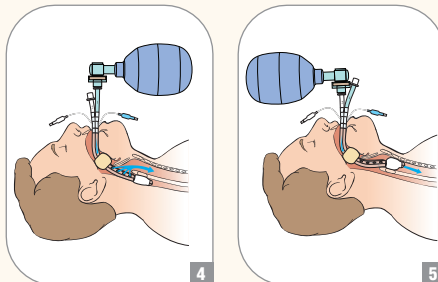
### Step 5

- If auscultation of breath sounds is negative, attach breathing device to the shorter, clear connecting tube and ventilate.
- Confirm tracheal ventilation with auscultation of breath sounds and end-tidal CO<sub>2</sub> detection. The *Combitube* airway is functioning as a tracheal tube in this case.



### Cuff Inflation

Size	Large Cuff	Small Cuff
37 Fr	85 mL	12 mL
41 Fr	100 mL	15 mL



**tyco**

Healthcare

**Nellcor**

4280 Hacienda Drive  
Pleasanton, CA 94588  
Tel 925.463.4000  
Toll Free 1.800.635.5267  
www.nellcor.com

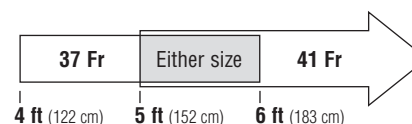
Tyco Healthcare UK LTD.  
154 Fareham Road  
Gosport, UK PO13 0AS  
Tel +44.1329.224000

© 2007 Nellcor Puritan  
Bennett LLC. All rights  
reserved. *Combitube* is  
a registered trademark of  
Tyco Healthcare Group  
LP or an affiliate.

B.k 1395v2-0307  
AW06803

### Ordering Information

Description	Quantity	Catalog Number
<b>Size 37 Fr (O.D.) (For patients 4' to 6' tall)</b>		
<i>Combitube</i> Single	4/carton	5-18237
<i>Combitube</i> Roll-up Kit	4/carton	5-18437
<i>Combitube</i> Tray Kit	4/carton	5-18537
<b>Size 41 Fr (O.D.) (For patients 5' tall and above)</b>		
<i>Combitube</i> Single	4/carton	5-18241
<i>Combitube</i> Roll-up Kit	4/carton	5-18441
<i>Combitube</i> Tray Kit	4/carton	5-18541
<b><i>Combitube</i> Demonstration Airway Kit</b>		
For demonstration use only, 41 Fr	1/carton	5-18141



Kits include large syringe, small syringe, suction catheter and elbow.