ANAESTHESIA BREATHING SYSTEMS
ANAESTHESIA COMPONENTS
AIRWAY MANAGEMENT
VENTILATOR
CICO (CAN'T INTUBATE, CAN'T OXYGENATE)
VENTILATOR BREATHING SYSTEMS
BREATHING FILTERS
EPIDURAL
IV ACCESS
NEURAXIAL ULTRASOUND
NEUROMUSCULAR BLOCK & ANALGESIA MONITORING
OXYGEN & AEROSOL THERAPY
PATIENT WARMING
PATIENT POSITIONING
RESUSCITATION
TEMPERATURE MONITORING
TOTAL INTRAVENOUS ANAESTHESIA (TIVA)
ANESTAND

ANAESTHETIC & CRITICAL CARE CATALOGUE

Value Through Innovation
Lateral Medical is an Australian-owned company that specialises in providing medical professionals with innovative and cost effective medical devices that improve patient care and clinical outcomes.

Being a clinician-first organisation, we listen to our user-base to source and develop innovative solutions based on the unique needs of the Anaesthesia & Critical Care community.

We are an ISO9001 accredited company with an extensive network of product specialists providing education, sales and support throughout Australia & New Zealand.

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ANAESTHESIA
Breathing Systems

Adult Parallel Circuits
Split Lumen Circuits
Anaesthesia Face Masks
Breathing Trainer

Adult Mapleson Circuits
Paediatric Circuits
Spirometry Kit
Soda Lime Absorbents

Adult Coaxial Circuits
Catheter Mounts
Nitrous Oxide Systems
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<td>Video Laryngoscope</td>
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SECOND GENERATION FLEXIBLE
Laryngeal Mask Airway

Flexible 2nd generation Laryngeal Mask Airway with Sliding Bite Block is differentiated from other second generation Supraglottic Airway Devices by having a flexible wire-reinforced airway tube and separate drainage tube that allows it to be positioned away from the surgical field. It is particularly useful in procedures where the surgeon and anaesthesiologist are working in the same area, such as procedures involving the mouth, head or neck.

FEATURES

- Worlds first truly flexible second generation Laryngeal Mask Airway.
- Large volume #7 reinforced gastric drain tube.
- Improved pharyngeal seal and improved gastric seal.
- Able to intubate through the Laryngeal Mask Airway with the use of an Aintree Intubating catheter.

<table>
<thead>
<tr>
<th>DEVICE CODE</th>
<th>DEVICE NAME</th>
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<td>DF2GSAD5</td>
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<td>DF2GSAD4</td>
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<td>DF2GSAD3</td>
<td>Flexi - 2G SAD with Sliding Bite Block</td>
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</tbody>
</table>

Units : Minimum Order Quantity 5 and Multiples thereof

- The Sliding Bite Block allows the airway tube to be easily repositioned for surgical access and prevents airway occlusion and negative pressure pulmonary oedema caused by the patient biting down on the airway tube.
- The airway tube may be relocated from side to side during the surgical procedure, without loss of seal of the cuff against the larynx.
- The airway tubing and gastric drainage tubing are independent and manufactured from reinforced silicone tubing able to conform to the abnormally shaped oro-pharynx where using firm anatomically shaped Laryngeal Mask Airway’s may fail.
AIR-Q3 - 2nd Generation Supraglottic Airway Device

- Air-Q®3G - Features an extra wide gastric inlet access and two gastric channels that accommodate NG tubes up to 18 Fr.
- Air-Q®sp3G - Features an extra wide gastric inlet access and two gastric channels that accommodate NG tubes up to 18 Fr. Also includes self-pressurising cuff that utilises positive pressure ventilatory source.

Unique, patented Epiglottis Elevator, help to safely lift the epiglottis to access the airway the first time.
### AIR-Q®3 INTUBATING LARYNGEAL AIRWAY WITH 15MM CONNECTOR

<table>
<thead>
<tr>
<th>ITEM</th>
<th>DESCRIPTION</th>
<th>SIZE</th>
<th>IDEAL BODY WEIGHT</th>
<th>MAXIMUM OETT</th>
<th>MOUTH OPENING</th>
<th>LENGTH OF TUBE</th>
<th>MAXIMUM OG TUBE</th>
<th>INFLATION VOLUME</th>
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<td>4.5 mm</td>
<td>11.0 mm</td>
<td>9.0 mm</td>
<td>8 Fr</td>
<td>0.5 - 1.0 mL</td>
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<tr>
<td>30155</td>
<td>Air-Q3G</td>
<td>1.5</td>
<td>7 - 17 kg</td>
<td>5.0 mm</td>
<td>14.0 mm</td>
<td>11.0 mm</td>
<td>10 Fr</td>
<td>1.0 mL</td>
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<tr>
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<td>17 - 30 kg</td>
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<td>12 Fr</td>
<td>1.0 - 2.0 mL</td>
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<td>30 - 60 kg</td>
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<td>23.0 mm</td>
<td>18.0 mm</td>
<td>18 Fr</td>
<td>3.0 - 4.0 mL</td>
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<tr>
<td>30505</td>
<td>Air-Q3G</td>
<td>5</td>
<td>&gt; 80 kg</td>
<td>9.0 mm</td>
<td>25.0 mm</td>
<td>20.0 mm</td>
<td>18 Fr</td>
<td>4.0 - 5.0 mL</td>
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<tr>
<td>60105</td>
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<td>1.0</td>
<td>4 - 7 kg</td>
<td>4.5 mm</td>
<td>11.0 mm</td>
<td>9.0 mm</td>
<td>8 Fr</td>
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</tr>
<tr>
<td>60155</td>
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<td>7 - 17 kg</td>
<td>5.0 mm</td>
<td>14.0 mm</td>
<td>11.0 mm</td>
<td>10 Fr</td>
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<td>5.5 mm</td>
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<td>14.0 mm</td>
<td>12 Fr</td>
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<td>60 - 80 kg</td>
<td>8.0 mm</td>
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<tr>
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<td>Air-Qsp3G</td>
<td>5</td>
<td>&gt; 80 kg</td>
<td>9.0 mm</td>
<td>25.0 mm</td>
<td>20.0 mm</td>
<td>18 Fr</td>
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</table>
Bougies and Stylets

Flexicare’s single use Bougies and Stylets complement the range of Laryngoscopes and Endotracheal Tubes, providing clinicians with a comprehensive choice of airway management devices.

**Bougies**
The rounded tip provides a smooth surface that allows the Bougie to be inserted without damaging the soft tissue.

**Coude Tip**
Facilitates correct placement by providing accurate feel of the tracheal wall C-Rings. The flexibility also allows for easy removal once an ET Tube is in situ.

**Clearly Graduated Marking**
Provides depth indication to guide correct placement.

**Eliminate the Risk of Cross Contamination**
Provided sterile, the single patient use Bougie eliminates the risk of cross-infection.

<table>
<thead>
<tr>
<th>Item Code</th>
<th>Description</th>
<th>OD</th>
<th>CH</th>
<th>Length</th>
<th>Use</th>
<th>Quantity</th>
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<td>038-968-033</td>
<td>Bougie / Introducer OD 3.3mm (10CH) x 700mm Sterile</td>
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<td>15CH</td>
<td>700mm</td>
<td>Adult</td>
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</table>

**Stylets**
The malleable styles have an aluminium core and a soft touch outer casing in a range of outer diameters and lengths to meet specific patient needs.

**Range of Flexibility**
The stylets can be shaped into the required curvature to suit the intubation need.

**Smooth Tip**
Reduces the risk of damaging soft tissue.

**Single Patient Use**
Supplied sterile, eliminating the risk of cross-contamination.

<table>
<thead>
<tr>
<th>Item Code</th>
<th>Description</th>
<th>OD</th>
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<th>Length</th>
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ENDOTRACHEAL TUBES
VentiSeal (High Volume Low Pressure)

VentiSeal reduces the risk of vocal cord injury and tracheal necrosis through an optimal volume cuff with ideal pressure distribution and effective sealing. The thin ultra-smooth cuff wall reduces abrasive creases and folds, conforms to the tracheal contours and provides an effective seal.

Kink Resistant
Ensures tube patency for patient safety, whilst softening at body temperature to conform to the patient’s respiratory tract.

Depth Guide
The double line guide facilitates safe and accurate cuff placement below the vocal cords.

Pilot Balloon
In addition to providing a tactile check on cuff inflation, the pilot balloon clearly identifies the tube size.

<table>
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<th>Size ID (mm)</th>
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<th>Curved (Oral) South</th>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>
ENDOTRACHEAL TUBES
VentiSeal (High Volume Low Pressure)

The Standard range of Low Pressure Endotracheal Tubes are designed for short-term intubation. The cuff size and shape make the them ideal for emergency situations, as the slim-line shape facilitates quick and easy intubation to maintain an open airway.

**Kink Resistant**
Ensures tube patency for patient safety, whilst softening at body temperature to conform to the patient’s respiratory tract.

**Depth Guide**
The double line guide facilitates safe and accurate cuff placement below the vocal cords.

**Pilot Balloon**
In addition to providing a tactile check on cuff inflation, the pilot balloon clearly identifies the tube size.

**High Resolution Radiopaque Line**
Guarantees easy and accurate identification of tube position and location during X-ray.

<table>
<thead>
<tr>
<th>Size ID (mm)</th>
<th>Oral/Nasal</th>
<th>Curved (Oral)</th>
<th>Curved (Nasal)</th>
<th>Pack Size</th>
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<tbody>
<tr>
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<td>038-981-055</td>
<td>038-982-055</td>
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<td>038-984-060</td>
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<td>038-984-075</td>
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<tr>
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<td>038-984-080</td>
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<td>038-981-110</td>
<td>10</td>
</tr>
</tbody>
</table>

**ET Tube Holder**
Securely retains the position of all sizes of ET Tube.

**Jaw Opener**
To be used with an ET Tube when the patient has ‘Teeth Clench.’

**ET Tube & Tracheostomy Straps**
Eliminates the need for taping and distributes pressure evenly.
LARYSEAL Clear and MRI

LarySeal Clear is a single patient use PVC laryngeal mask airway, engineered using extra soft satin textured materials to replicate as closely as possible the performance of silicone, providing Clinicians with a similar feel to LarySeal Blue and LarySeal Multiple.

LarySeal MRI provides the same benefits of LarySeal Clear with the added benefit of a metal-free inflation valve, allowing LarySeal MRI to be used safely within the MRI suite.

- Medical Grade PVC
- Sterile Packed
- MRI Compatible
- Single Use
- Cost Effective

Crush Resistant Tube
The thickness of the main tube wall reduces the risk of crushing.

Less Risk of Slipping or Dislocation
The satin surface finish of the LarySeal Clear cuff provides a similar texture to silicone, whilst ensuring ease of insertion.

Colour Coded Pilot Balloon
Ease of identification of sizing by colour coded pilot balloons.

Universal Connection
15mm Male connector provides a universal connection.

Cost Effective
Eliminates the need for cleaning and re-sterilising, saving time and cost.

Easy Indication of the Cuff Pressure
Thin wall pilot balloon indicates the inflation of the cuff.

<table>
<thead>
<tr>
<th>CLEAR</th>
<th>MRI</th>
<th>Clear Size</th>
<th>MRI Code</th>
<th>100-pack</th>
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</thead>
<tbody>
<tr>
<td>038-94-310</td>
<td>038-94-410</td>
<td>LarySeal 1</td>
<td>&lt;5kg</td>
<td>1</td>
</tr>
<tr>
<td>038-94-315</td>
<td>038-94-415</td>
<td>LarySeal 1.5</td>
<td>5kg - 10kg</td>
<td>10</td>
</tr>
<tr>
<td>038-94-320</td>
<td>038-94-420</td>
<td>LarySeal 2</td>
<td>10kg - 20kg</td>
<td>10</td>
</tr>
<tr>
<td>038-94-325</td>
<td>038-94-425</td>
<td>LarySeal 2.5</td>
<td>20kg - 30kg</td>
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<tr>
<td>038-94-330</td>
<td>038-94-430</td>
<td>LarySeal 3</td>
<td>30kg - 50kg</td>
<td>10</td>
</tr>
<tr>
<td>038-94-340</td>
<td>038-94-440</td>
<td>LarySeal 4</td>
<td>50kg - 70kg</td>
<td>10</td>
</tr>
<tr>
<td>038-94-350</td>
<td>038-94-450</td>
<td>LarySeal 5</td>
<td>70kg - 100kg</td>
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</table>

LarySeal Clear in Slimline Pack

<table>
<thead>
<tr>
<th>Code</th>
<th>Clear Size</th>
<th>MRI Code</th>
<th>100-pack</th>
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<tr>
<td>038-94-740</td>
<td>038-94-740</td>
<td>20</td>
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</tr>
<tr>
<td>038-94-750</td>
<td>038-94-750</td>
<td>20</td>
<td></td>
</tr>
</tbody>
</table>
LarySeal Flexi is specially designed for use in ophthalmic, ENT, dental and other head/neck surgeries. The reinforced construction of the main tube allows it to be positioned well away from the surgical field, improving surgical access without compromising the seal.

**- Sterile Packed**  
**- Medical Grade PVC**  
**- Single Use**  
**- Cost Effective**  
**- Flexible Main Tube**

**Reinforced**  
The main tube is reinforced with kink-free wire to eliminate the risk of airway tube occlusion.

**Less Risk of Slipping or Dislocation**  
The satin surface finish of the LarySeal Flexi cuff provides a similar texture to silicone, whilst ensuring ease of insertion.

**Flexible Main Tube**  
The flexible main tube allows it to be positioned away from the surgical field, improving surgical access.

**Universal Connection**  
15mm Male connector provides a universal connection.

**Easy Indication of the Cuff Pressure through Pilot Balloon**  
Thin wall pilot balloon indicates the inflation of the cuff.

**Colour Coded Pilot Balloon**  
Ease of identification of sizing by colour coded pilot balloons.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Pressure Range</th>
<th>Size</th>
<th>Quantity</th>
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<tbody>
<tr>
<td>038-94-520</td>
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<tr>
<td>038-94-525</td>
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<td>20kg - 30kg</td>
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<tr>
<td>038-94-530</td>
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<tr>
<td>038-94-540</td>
<td>LarySeal Flexi Size 4</td>
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<tr>
<td>038-94-550</td>
<td>LarySeal Flexi Size 5</td>
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**Accessories**

<table>
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<tbody>
<tr>
<td>038-94-001</td>
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LARYSEAL
Multiple

Our silicone reusable laryngeal mask airways can be sterilised up to a recommended 40 times. The LarySeal Multiple cuff adapts to the contour of the oropharyngeal area to provide a secure seal.

- Medical Grade Silicone
- Autoclavable

Crush Resistant Tube
The thickness of the main tube wall reduces the risk of crushing, while the star lumen ensures patency.

Secure Seal for Airway Management
The silicone cuff of the mask moulds against the contours of the oropharyngeal area, providing a secure seal.

Universal Connection
15mm Male connector provides a universal connection.

Autoclavable, Reusable
Durable, high temperature resistant material, recommended for up to 40 autoclave cycles. A reprocessing record card is provided with every LarySeal Multiple.

Indication of the Cuff Pressure through Pilot Balloon
Thin wall pilot balloon indicates the inflation of the cuff.

Colour Coded Pilot Balloon
Ease of identification of sizing by colour coded pilot balloons.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Weight Range</th>
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<td>038-94-115</td>
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</table>
LARYSEAL Blue

The world’s first silicone single patient use laryngeal mask airway provides all the benefits of the reusable LarySeal Multiple while protecting against cross contamination.

- Sterile Packed
- Medical Grade Silicone
- Single Use
- Cost Effective

Crush Resistant Tube
The thickness of the main tube wall reduces the risk of crushing, while the star lumen ensures patency.

Less Risk of Slipping or Dislocation
The silicone matt surface of the LarySeal Blue cuff moulds closely over the glottic area and reduces the risk of movement or dislocation of the cuff.

Slimline Pack Option
Eco-friendly slimline packaging frees up storage space.

Universal Connection
15mm Male connector provides a universal connection.

Reduced Risk of Cross Contamination
Sterile product in secure packaging.

Indication of the Cuff Pressure through Pilot Balloon
Thin wall pilot balloon indicates the inflation of the cuff.

Colour Coded Pilot Balloon
Ease of identification of sizing by colour coded pilot balloons.

<table>
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<tr>
<th>Slimline Pack</th>
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<tr>
<td>038-94-650</td>
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<table>
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<tr>
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<tr>
<td>LarySeal Blue Size 5</td>
<td>70kg - 100kg</td>
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The Classification of Laryngoscopes

1. Conventional Laryngoscopes
The Conventional Laryngoscope, also referred to as a Standard Laryngoscope, has a light bulb incorporated into the blade, approximately 1/3 of the distance from the tip. The light bulb screws into position and is powered via an integral line that transfers power from the batteries located within the handle.

2. Fibre Optic Laryngoscopes
The bulb in a Fibre Optic Laryngoscope is located in the handle and the light is transferred to the proximal tip of the blade via a fibre optic bundle, so the light is transmitted without heat, eliminating the risk of thermal damage to the patient’s tissues within the patient’s oral cavity.

Single Patient Use Handles and Disposable Blades
Prions, such as those associated with vCJD, are known to survive autoclaving, so a risk of cross-infection can remain even after sterilisation. Inadequate cleaning and reprocessing may also lead to residual bacterial and viral contamination.

Studies have shown that even decontaminated laryngoscope handles are a major source of cross contamination, with few being sterilised as often as needed. The risk of cross contamination is further compounded by the lack of adequate cleaning and reprocessing of handles.

Flexicare’s range of single patient use laryngoscope blades and handles, such as BritePro Solo and BriteBlade Pro, eliminates the risk of cross contamination.

It has been demonstrated that single patient use blades and handles are cost effective when compared with reusable laryngoscopes.

Difficult Intubation
The lever operated hinged tip of Flexicare’s Flexible blades provides greater tongue lift for an improved view of the airway during difficult intubations.
FIBRE OPTIC
Reusable Speciality Blades

Flexicare offers a range of fibre optic reusable speciality blades designed to provide clinicians with a complete choice for specific patient intubation requirements.

Robert Shaw Fibre Optic Blades
Designed for neonatal and infant use, Robert Shaw blades feature a gentle shallow blade curvature to lift the epiglottis indirectly in a similar way to Macintosh Blades.

Seward Fibre Optic Blades
Designed originally as an infant blade for asphyxia neonatorum, the Seward Blade is also used for paediatric patients.

Wisconsin Fibre Optic Blades
Designed for neonatal and infant use, the Wisconsin Blade provides an improved view and greater control of the epiglottis with a subtly wider distal end than a standard Miller Blade.

<table>
<thead>
<tr>
<th>ROBERT SHAW</th>
<th>SEWARD</th>
<th>WISCONSIN</th>
</tr>
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<tbody>
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<td>040-930</td>
<td>040-920</td>
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<td>040-931</td>
<td>040-951</td>
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<tr>
<td>040-952</td>
<td>040-921</td>
<td>Size 2</td>
</tr>
<tr>
<td></td>
<td>040-922</td>
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<tr>
<td></td>
<td>040-923</td>
<td>Size 4</td>
</tr>
</tbody>
</table>
**FIBRE OPTIC**

**Reusable Laryngoscope Blades**

The integrated fibre optic bundle within the body of the IntegraBlade makes the structure seamless, reducing the risk of contamination or foreign bodies becoming trapped, for easier and more effective reprocessing.

**Increased Brightness**

The Flexicare IntegraBlade is designed with an integrated wide profile fibre optic bundle to provide maximum light transfer.

**Rounded Tip**

The blade features an atraumatic curved tip which reduces the risk of tissue damage.

**Fully Autoclavable**

The 100% stainless steel construction of the blade provides long life, ensuring long term usage even after repeated autoclaving.

---

**Fibre Optic Box Sets**

<table>
<thead>
<tr>
<th>MAC</th>
<th>MILLER</th>
</tr>
</thead>
<tbody>
<tr>
<td>040-860</td>
<td>Standard Size Handle - Knurled, with 3 Macintosh Blades Sizes 1, 2 and 3</td>
</tr>
<tr>
<td>040-861</td>
<td>Standard Size Handle - Knurled, with 4 Macintosh Blades Sizes 1, 2, 3 and 4</td>
</tr>
<tr>
<td>040-862</td>
<td>Standard Size Handle - Knurled, with 3 Macintosh Blades Sizes 2, 3 and 4</td>
</tr>
</tbody>
</table>
Flexicare has a full range of reusable fibre optic laryngoscope blades and handles conforming to EN ISO 7376:2009. Using the highest grade of fibre optics provides maximum cold light transfer giving an optimal view of the larynx.

**Fibre Optic Macintosh Blades**
The curved design of the Macintosh blade allows the tip to be guided to the epiglottic vallecula for direct visualisation of the glottis whilst holding the tongue to the side for direct vision of intubation.

**Fibre Optic Miller Blades**
The straight Miller blade with a shallow curved tip provides greater control in patients with a larger epiglottis, such as in paediatric patients. Infant and neonatal Miller blades are also available with a delivery port to provide supplementary oxygen during laryngoscopy.

**Fibre Optic Flexible Blades**
Based on the standard Macintosh blade, the Flexible blade has a hinged tip operated by a lever mechanism. This elevates the epiglottis while reducing the amount of force required. A Flexible blade has been shown to improve the view during difficult intubations and in patients wearing cervical collars.

<table>
<thead>
<tr>
<th>MAC</th>
<th>MILLER</th>
<th>FLEXIBLE</th>
<th>OXY MILLER</th>
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</thead>
<tbody>
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<td>040-835</td>
<td>040-836</td>
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<td></td>
</tr>
</tbody>
</table>
CONVENTIONAL REUSABLE
Standard Laryngoscope Blades

Flexicare’s range of conventional reusable laryngoscope blades are manufactured from high quality stainless steel. The light bulb in the blade can easily be changed and the distance from the bulb to the blade tip protects the patient from accidental burns, whilst providing a high level of illumination.

High Quality Stainless Steel • Fully Autoclavable Blades • Full Range of Blade Sizes • Conforming to EN ISO 7376:2009

Conventional Reusable Speciality Blades
Flexicare offers a range of conventional reusable speciality blades designed to provide clinicians with a complete choice for specific patient intubation requirements.

Robert Shaw Conventional Blades
Designed for neonatal and infant use, Robert Shaw blades feature a gentle shallow blade curvature to lift the epiglottis indirectly in a similar way to Macintosh Blades.

Sward Conventional Blades
Designed originally as an infant blade for asphyxia neonatorum, the Seward Blade is also used for paediatric patients.

Wisconsin Conventional Blades
Designed for neonatal and infant use, the Wisconsin Blade provides an improved view and greater control of the epiglottis with a subtly wider distal end than a standard Miller Blade.
CONVENTIONAL REUSABLE
Laryngoscope Handles & Box Sets

All handles are Bipolar, allowing the Laryngoscope to function irrespective of the direction the batteries are inserted. The handles can be opened at both ends to remove swollen batteries with ease.

In addition to the Fibre Optic and Conventional Reusable Laryngoscope Box Sets which are readily available, Flexicare offers a customisation service so clinicians can choose a combination of handles and blades for a bespoke intubation pack. The handles and blades are protected by the outer casing as well as being securely held in place within designated foam inner compartments.

For further information please contact us to discuss your requirements.

**Box Sets**
A range of box sets are available, with combinations of 3 or 4 blades.

**Available in Two Surface Finishes**
The range of Laryngoscope handles are available in a smooth or knurled finish.

### Conventional Handles

<p>| | | | |</p>
<table>
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<tr>
<th></th>
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<tr>
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<td>040-013</td>
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### Krypton Bulbs

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<tr>
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### Standard Box Sets

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<tr>
<td>040-239</td>
<td>Standard Size Handle - Knurled, with 3 Macintosh Blades Sizes 2, 3 and 4</td>
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<tr>
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### Magill Forceps

Flexicare offers a range of Magill Forceps for clinicians to guide tracheal tubes into the larynx or aid nasogastric tubes into the oesophagus whilst maintaining an uninterrupted view. The stainless steel single patient use forceps are available in 3 sizes to meet specific patients’ requirements.

**Precision Engineered**
Made from high grade stainless steel, the fine attention to detail makes these forceps ideal for use during difficult procedures.

**Single Patient Use**
High quality forceps which look and feel like their reusable counterparts but without the risk of cross-infection.

<p>| | | |</p>
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<tr>
<td>042-411</td>
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<td>042-412</td>
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<td>Magill Forceps Infant - 15cms</td>
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BRITEPRO SOLO
Single Patient Use

BritePro Solo features a Single Patient Use handle and LED lightsource with a fibre optic all-metal blade. The blade and the handle confirm to all standard fibre optic systems.

Complete
Supplied sterile packed with fitted batteries and changeable blade. BritePro Solo is ready to use straight out of the box.

Ultra Low Profile Blade
Flexicare’s Ultra Low Profile Macintosh blade design reduces risk of dental damage, and improves visualisation of the vocal cords, even during a difficult intubation.

Ready When You Are
Simply open when needed, use and then dispose. BritePro Solo is ideal for all clinical areas, including Operating Theatres, Crash Trolleys and Emergency situations.

Performance
The textured grip provides excellent control and feel, while the high intensity light gives excellent visualisation.

Safe
Sterile, sealed and ready to use with an integral power source and light, BritePro Solo eliminates risk of cross contamination.

Reliable
With the advantage of being new every time, BritePro Solo can easily be tested “in-pack” without compromising sterility.

Mini Handle Option
Suitable for neonates and small infants, the lightweight BritePro Solo Mini handle provides excellent tactile feedback to the user.

Wide Choice
Full range of true Macintosh and Miller Blades.

<table>
<thead>
<tr>
<th>MAC</th>
<th>MILLER</th>
<th>MINI + MILLER</th>
<th>Sterile packed with fitted batteries</th>
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<td>BritePro Solo with Pro Blade - Size 4</td>
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Fibre Optic Box Sets

| 040-309 | BritePro Solo Mini Handle | 20 |
| 040-310 | BritePro Solo Handle | 20 |
Why Single Patient Use?

Reusable Laryngoscopes are classified as high risk, and handles are a known source of cross-contamination. Studies have shown that decontamination using impregnated germicidal wipes is ineffective - with between 75%1 and 86%2 of “patient ready” handles remaining positive for bacterial contamination.

The AAGBI Safety Guideline on Infection Control 3 recommends that reusable laryngoscope handles be “sterilised by SSDs after every use”, and concludes “single-use disposable equipment will remove the difficulties of reuse and decontamination procedures. The use of such equipment is to be encouraged”.

BritePro Solo not only offers optimal patient safety, reliability and convenience of single use, but is cost effective 4,5 compared with reusable purchase, maintenance, replacement, reprocessing and sterilisation costs, and overcomes the problems associated with reusable systems:

- Laryngoscope failure rates as high as 30-50% as a result of reprocessing.6,7
- Risk of cross-contamination resulting from poor cleaning or bacteria that remain following cleaning.1,2
- Frequent loss of product and potential time delays in product availability.
- Diminished light transfer over time that can lead to lower rates of first intubation success as compared to disposable metal blades.6,7

References:
4 Vasquez C. Cost of Reprocessing Reusable Laryngoscopes. Glendale Adventist Hospital (2012)
GreenLine®/D™ Fiber Optic Laryngoscope
ALL-METAL MACINTOSH
LATEX FREE | STERILE | SINGLE PATIENT USE | DISPOSABLE

• Flexible fiber optic bundle protected in black plastic sheath
• Designed with three ball bearings in the heel for secure handle attachment
• Macintosh blades feature beaded tip reduces tissue trauma
• Constructed of surgical grade 303/304 stainless steel

GreenLine®/D™ Fiber Optic Laryngoscope
ALL-METAL MILLER
LATEX FREE | STERILE | SINGLE PATIENT USE | DISPOSABLE

• Flexible fiber optic bundle protected in black plastic sheath
• Designed with three ball bearings in the heel for secure handle attachment
• Constructed of surgical grade 303/304 stainless steel

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GreenLine®/D™ Fiber Optic Laryngoscope

**ALL-METAL WIS-HIPPLE**
LATEX FREE | STERILE | SINGLE PATIENT USE | DISPOSABLE

- Flexible fiber optic bundle protected in black plastic sheath
- Designed with three ball bearings in the heel for secure handle attachment
- Constructed of surgical grade 303/304 stainless steel

**ITEM DESCRIPTION SIZE A B PK**
5-5334-15 Small Child 1.5 115 mm 12 mm 20

GreenLine®/D™ Fiber Optic Laryngoscope

**ALL-METAL PHILLIPS**
LATEX FREE | STERILE | SINGLE PATIENT USE | DISPOSABLE

- Flexible fiber optic bundle protected in black plastic sheath
- Designed with three ball bearings in the heel for secure handle attachment
- Macintosh blades feature beaded tip reduces tissue trauma
- Constructed of surgical grade 303/304 stainless steel

**ITEM DESCRIPTION SIZE A B PK**
5-5338-09 Textured Grip Disp. Handle Medium 20
5-5338-10 Textured Grip Disp. Handle Penlite 20
5-5338-11 Textured Grip Disp. Handle Stubby 20
5-5338-12 Textured Grip Disp. Handle Standard 20

**BLADE MEASUREMENTS**
PREVENT THE RISK OF CROSS CONTAMINATION with Single Patient Use Fiber Optic Laryngoscope Blades & Handles.

GreenLine®/D™ Fiber Optic Laryngoscope
MACINTOSH
LATEX FREE | STERILE | SINGLE PATIENT USE | DISPOSABLE | CE MARK

GreenLine®/D™ Fiber Optic Laryngoscope
MILLER
LATEX FREE | STERILE | SINGLE PATIENT USE | DISPOSABLE | CE MARK

- Disposable blade solves contamination problems and eliminates the cost and time spent cleaning blades and returning them for use
- Answers the clinician’s request for a non-plastic, single-use blade suitable for everyday hospital use
- Polished acrylic stem produces exceptional illumination
- Compliant with ISO standard 7376
- Green System compatible
- Constructed of surgical stainless steel

<table>
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<tr>
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<td>100 mm</td>
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</tr>
<tr>
<td>5-5332-03</td>
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<td>130 mm</td>
<td>22 mm</td>
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<td>205 mm</td>
<td>18 mm</td>
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NasoSafe is an innovative Nasopharyngeal Airway. The swivel safety grip eliminates the risk of the airway from being drawn down the nasal passage whilst providing maximum comfort for the patient.

Patient Comfort
The safety grip can be rotated through 360° to place the airway in the most convenient and comfortable position without blocking the free nostril.

Size Colour Coding
Available in 11 sizes with colour coded swivel grips, that co-ordinate with suction catheter sizes.

Allows Access
NasoSafe is ideal when the oral passage is not accessible and allows for nasotracheal succioning.

Swivel Safety Grip
The NasoSafe swivel grip prevents the nasopharyngeal airway from being drawn into the nasal passage without the need for an additional fixation device, such as a safety pin.

Reduced Risk of Injury
The rounded edge of the tip combined with the angle cut design helps reduce the risk of injury during intubation.

Patient Fit
Available in 11 sizes for optimal patient fit.

NasoSafe is best inserted when the patient is in the supine position. The airway should be lubricated with a water soluble lubricant prior to insertion. The rounded bevelled tip reduces mucosal wall trauma and guides the airway along the floor of the nasal passage. When correctly in place the tip of the airway should be visible behind the uvula.

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Nasoclear is a simple and effective airway adjunct designed for easy insertion and maximum patient compliance.

**In-Built Safety**
Nasoclear has an integrated connector designed to prevent the tube from travelling down the nasal passage and removes the need to use a safety pin, eliminating the risk of needle stick injury.

**Clear Construction**
Provides visual confirmation before insertion that there are no blockages.

**Reduced Risk of Injury**
Rounded bevelled tip reduces mucosal wall trauma and guides the airway along the floor of the nasal passage.

**Patient Comfort**
Nasoclear is better tolerated by awake patients than oropharyngeal airways.

**Flared Nasal Opening**
The large flared opening prevents the nasopharyngeal airway from physically travelling down the nasal passage and allows for comfortable positioning without obstructing the other nostril.

**Patient Fit**
Available in 11 sizes for optimal patient fit.

**Nasopharyngeal Airway Insertion Technique**

The length of the nasal airway can be estimated by the distance from the patient’s nostril to the earlobe, or the angle of the jaw.

The nasal airway is best inserted when the patient is in the supine position. Lubricate the airway prior to insertion with a water soluble lubricant.

Insert with the curve facing the opposing direction and follow the nasal passage whilst turning the nasopharyngeal airway through 180°.

**Nasoharyngeal Airway Insertion Technique**

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**AIRWAYS**

**Guedel Airways**
Guedel Airways provide free air flow whilst protecting the airway from occlusion.

**Williams Airways**
Opening on the distal half of the lingual surface, provides a conduit for fibre-optic guided intubation.

**Colour Coded**
Easy identification of the required size.

**Integrated Bite Block**
Prevents the patient from biting down and occluding airway.

**Smooth bevelled tip**
Allows for easy insertion and minimising the risk of causing patient trauma.

**Sterile**
Individually packaged and single use. Supplied sterile to reduce risk of crossinfection.

**Embossed Size**
Device size is embossed on airway providing easy identification of size even if the user is unfamiliar with colour coding.

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**Berman Oropharyngeal Airways**
Side channels enable the use of suction catheters without obstructing the airway, whilst allowing for additional air flow.
The Interchangeable Oral-Nasal Endotracheal Tube from Genesis Airway is ideal for use in maxillofacial surgery, where both oral and nasal intubation may be required. It is also suitable for initial intubation of trauma patients in the emergency department, where nasal intubation may be later required for maxillofacial surgery or patient transport.

- Flexible reinforced endotracheal tube with a posterior facing bevel, modified cuff inflation line insertion and a removable 15 mm ISO connector.
- Flexible reinforced airway tubing having a fixed 15 mm ISO connector and a connector to mate to an Introducer.
- Introducer.
- Malleable stylet.

### PACKAGE CONTAINS

- Flexible reinforced endotracheal tube with a posterior facing bevel, modified cuff inflation line insertion and a removable 15 mm ISO connector.
- Flexible reinforced airway tubing having a fixed 15 mm ISO connector and a connector to mate to an Introducer.
- Introducer.
- Malleable stylet.

### DEVICE CODE | DEVICE NAME                                | SIZE |
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DONETT80 | Interchangeable Oral-Nasal Endotracheal Tube | 8.0  |
DONETT75 | Interchangeable Oral-Nasal Endotracheal Tube | 7.5  |
DONETT70 | Interchangeable Oral-Nasal Endotracheal Tube | 7.0  |
DONETT65 | Interchangeable Oral-Nasal Endotracheal Tube | 6.5  |
DONETT60 | Interchangeable Oral-Nasal Endotracheal Tube | 6.0  |
DONETT55 | Interchangeable Oral-Nasal Endotracheal Tube | 5.5  |
DONETT50 | Interchangeable Oral-Nasal Endotracheal Tube | 5.0  |

Units: Minimum Order Quantity 5 and Multiples thereof

- All Genesis airway endotracheal tubes have posterior facing bevels shown to be safer when passed through the nasopharynx and to provide a greater initial success rate of intubation when railroaded over a bougie or fiberoptic scope.
- Atraumatic nasal intubation with soft, flexible and blunt introducer attached to flexible reinforced airway tubing has been shown to reduce the risks associated with nasal intubation.
- All Genesis airway endotracheal tubes have high volume low pressure cuffs to seal the airway without trauma.
The **Nasal Laryngeal Mask Airway from Genesis Airway** is the world’s first commercially available nasal laryngeal mask. It allows good surgical access for dental, maxillofacial, ear nose and throat, head and neck surgery. A Laryngeal Mask Airway is less invasive than an endotracheal tube (ETT), making it ideal for day surgery.

**PACKAGE CONTAINS**

- Flexible reinforced laryngeal mask airway with a removable 15 mm ISO connector.
- Flexible reinforced airway tubing having a fixed 15 mm ISO connector and a connector to mate to an Introducer.
- Introducer.

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<th>DEVICE NAME</th>
<th>SIZE</th>
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Units : Minimum Order Quantity 5 and Multiples thereof

- For oral surgical procedures, the airway is more secure using a nasal Laryngeal Mask Airway compared to the use of an oral Laryngeal Mask Airway for oral surgical procedures.
- It allows the surgeon to have complete access to the oral cavity and provides the ability to check the bite and occlusion of the teeth.
- Well tolerated and may be removed in recovery room, thus improving operating room efficiency.
ALL GENESIS ETT DEVICES:

- Are designed to for use with video laryngoscopes allowing easy passage
- Reduce tracheal, laryngeal trauma and vocal cord trauma
- Offer several advantages in an unexpected difficult airway
- Secure the endotracheal tube in the mid-line, reducing trauma caused by the lever and fulcrum mechanism that increases the force transmitted to the trachea/vocal cords and larynx
- Have high volume, low pressure cuffs

Evidence based studies show that the posterior facing bevel (PFB) is better than the traditional lateral facing bevel (LFB). All Genesis ETTs have posterior facing bevels.

The larynx structure has vertical centreline/symmetry, and a PFB is more suited for passing through the cords.

PFB has a clinically proven higher ‘first pass’ rate than LFB.

The genesis curved atraumatic softened tip reduces potential ‘hang ups’ on laryngeal structures when passing through the vocal cords.

Arrow indicating gap between bevel and bougie allowing hang up on laryngeal structures.

Genesis endotracheal tube with posterior facing bevel and curved atraumatic tip designed to prevent hang up on laryngeal structures.
Genesis Oral RAE Endotracheal Tube is indicated to be used in any surgery to facilitate directing the tubes away from the surgical field above the neck (ophthalmology, ENT or facial surgery), and also for tonsillectomy and adenoidectomy with the mouth gag.

- Posterior facing bevel with curved atraumatic tip ensures first pass success with reduced laryngeal hang up.
- Designed to for use with video laryngoscopes allowing easy passage.
- Reduced tracheal, laryngeal trauma and vocal cord trauma.

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Units: Minimum Order Quantity 10 and Multiples thereof
Posterior facing bevels cause less trauma when passed through the nasopharynx and the bevel and tip formation make the Genesis endotracheal tube ideal to use in both laryngoscope assisted and blind intubations.

- The larynx/trachea/vocal cords are mid-line symmetrical structures unsuited for endotracheal tubes with asymmetrical lateral facing bevels.
- Posterior bevel offers several advantages in an unexpected difficult airway.

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Units: Minimum Order Quantity 10 and Multiples thereof
As SADs become the preferred device for securing an airway, the requirement to intubate through Laryngeal Mask Airway devices is becoming an increasingly frequent process in airway management. Genesis Airway Innovations has designed a unique and novel device that makes intubation through an Laryngeal Mask Airway safe, secure and simple.

## PACKAGE CONTAINS
- No stabilising rod is required.
- No interruption in ventilation while withdrawing the Laryngeal Mask Airway over the ETT.
- Reduced risk of accidental extubation while removing the Laryngeal Mask Airway.
- Rescue ETT have high volume low pressure cuffs suitable for long-term intubation and reducing tracheal barotrauma.

## DEVICE CODE | DEVICE NAME | SIZE
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DRESRF80 | Rescue Endotracheal Tube - Reinforced Flexible Tube | 8.0
DRESRF75 | Rescue Endotracheal Tube - Reinforced Flexible Tube | 7.5
DRESRF70 | Rescue Endotracheal Tube - Reinforced Flexible Tube | 7.0
DRESRF65 | Rescue Endotracheal Tube - Reinforced Flexible Tube | 6.5
DRESRF60 | Rescue Endotracheal Tube - Reinforced Flexible Tube | 6.0
DRESRF55 | Rescue Endotracheal Tube - Reinforced Flexible Tube | 5.5
DRESPVC80 | Rescue Endotracheal Tube - PVC Tube | 8.0
DRESPVC75 | Rescue Endotracheal Tube - PVC Tube | 7.5
DRESPVC70 | Rescue Endotracheal Tube - PVC Tube | 7.0
DRESPVC65 | Rescue Endotracheal Tube - PVC Tube | 6.5
DRESPVC60 | Rescue Endotracheal Tube - PVC Tube | 6.0
DRESPVC55 | Rescue Endotracheal Tube - PVC Tube | 5.5

Units: Minimum Order Quantity 5 and Multiples thereof
Evidence based studies have shown that the use of an obturating introducer for nasal intubation significantly reduces the risk of incidence and severity of epistaxis to the same, or less than, the incidence when using a red rubber catheter. It also reduced incidence of nasopharyngeal soft tissue damage and nasal pain post intubation.

- The proximal end of the intubation device is manufactured to connect with an endotracheal tube with a posterior facing bevel that allows for easier placement of the endotracheal tube in the trachea without the need for rotation.
- This device makes passage through the nasopharynx a simple technique. If the catheter passes from the nasopharynx to the oropharynx so will the endotracheal tube.
- Soiling of the lumen of the endotracheal tube in the passage through the nasopharynx is prevented as the introducing device obturates the apertures of the endotracheal tube.
- The external diameter of the complex passed through the nose remains the same as the external diameter of the endotracheal tube.
- The Genesis Nasal Obturating ETT is made from softer PVC material, making it easier to use with a bougie. Softer PVC also negates the requirement for thermo-softening prior to nasal intubation.

### DEVICE CODE

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</tbody>
</table>

Units: Minimum Order Quantity 10 and Multiples thereof
DENTAL LARYNGEAL MASK
Airway With Bite Block

FEATURES

- Standard flexible Laryngeal Mask Airway.
- Easy clip in/out mechanism allowing repositioning of the Bite Block.
- The Bite Block can be used vertically when waking patient from anaesthesia preventing biting down on Laryngeal Mask Airway tubing.
- Unobstructed surgical access to the entire oral cavity.

<table>
<thead>
<tr>
<th>DEVICE CODE</th>
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<tbody>
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<td>DFLMA25</td>
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</tbody>
</table>

Units : Minimum Order Quantity 5 and Multiples thereof

- Laryngeal Mask Airway is less invasive than an ETT making it ideal for day surgery. Improved recovery profile allowing an increase in theatre and surgical time efficiency.
- The Laryngeal Mask Airway tubing is locked into the medial side of Bite Block.
- The Bite Block provides a fulcrum over which the Laryngeal Mask Airway may be bent and taped over the cheek, minimizing interference with the surgical team.
ENDOTRACHEAL Tubes

Designed to be used (railroaded) over a bougie, fibre optic scope or with a stylet (shown to improve first-attempt intubation success in multiple studies) or for endotracheal intubation through an intubating laryngeal mask airway.

- A reinforced endotracheal tube with a posterior facing bevel provides a greater initial success rate of intubation when railroaded over a bougie or fibre optic scope.
- Genesis reinforced ETTs are made of soft, smooth non-stick PVC to allow easy passage over a bougie or fibre optic scope.

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<th>DEVICE CODE</th>
<th>DEVICE NAME</th>
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<td>DRET80</td>
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Units: Minimum Order Quantity 10 and Multiples thereof
Bougie Introducers are an invaluable tool when dealing with challenging airways, but sometimes they’re just not enough. When used in conjunction with a Video Laryngoscope, the Flexible Tip Bougie will help you find the way. Simply hold the Flexible Tip Bougie between your thumb and your forefinger, and then use your thumb to move the integrated slider forward and back to flex the tip anteriorly and posteriorly to navigate the device between the cords and into the larynx.

- **Flexible, steerable** tip makes it easier to navigate difficult airways.
- Use in conjunction with Video Laryngoscope for optimal results.
- Innovative slider is used between the thumb and forefinger to move the tip anteriorly and posteriorly.
- Tabs on slider are **easy to grip** and maneuver particularly when used with gloves.
- Slider tabs situated so they will not need to pass through vocal cords.
- **Blunt silicone tip** reduces the risk of tracheal trauma.
- **Bright phosphorous coating** on tip makes it highly visible, especially when used with Intubrite dual ultra-violet and LED lights.
- **Pre-curved** to provide anterior flexion, use the control mechanism to retro-flex and straighten to advance beyond the cords.
- Graduation marks from 10cm to 50cm (65cm overall length)
- Use with ETT’s with 7mm inner diameter or larger
- Latex free
- Box of 10
- Sterile for single patient use

**CODE: CM001-EU**

(Box of 10)
The JED® is the first non-invasive device that will maintain a patient airway in patients receiving light or deep sedation. The JED® eliminates the need for external manipulation (jaw thrust) or internal airway support (oral airways, nasal trumpets) and securely maintains spontaneous ventilation as sedation is adjusted to match surgical or procedural stimulus.

GO HANDS FREE
The JED® frees medical personnel from the need to hold the jaw manually in sedated or obtunded patients.

Easy, Non-Invasive
The JED® is non-invasive and easy to apply.

Helps Reduce Post-Op Complications
When left in place after a procedure, the JED® may reduce post-operative airway complications.

Reusable
The JED® provides both reusable arms and head support, eliminating the need for blankets, towels or donuts.

Applications
- Operating Room Procedures.
- MRI.
- Recovery.
- FOB Intubation.
- Interventional Radiology Procedures.
- Oral Surgery Procedures.
- Endoscopy Procedures.

Benefits
- Assists provider in maintaining an open airway in sedated or anesthetised patients without the need for additional instrumentation.
- Frees medical personnel from the need to hold the jaw manually in sedated patients.
- When left in place after a procedure, reduces post-operative airway complications.
- Non-invasive and easy to use.

Disposable mandible cups are positioned at the angle of the patient’s mandible, allowing manipulation of the jaw during the procedure. The soft foam material is designed to cushion the mandible, increasing patient comfort.
PPS Is On Target With This Innovative Solution For Airway Management.

Rapid Airway Management Positioner™ - also known as the “RAMP” – is an FDA registered, cost effective, single patient use, inflatable positioning device to facilitate endotracheal intubation and provide a customised view of the laryngeal anatomy.

Clinical Advantages

• **Customisable:** Existing foam based solutions are cumbersome and cannot be uniquely configured.
• **Speed:** Positioning can be achieved quickly.
• **Safety:** Can be rapidly implemented at any time during the perioperative period, intubation and extubation.
• **Disposable:** Eliminates risk of cross contamination/infection. Saves time on cleanup.
• **Portability:** RAMP cart has a small footprint and can be readily transported throughout the hospital. Everything stored in one location.

Economic Advantages

• **Cost of Use:** Costs comparable to using blankets and existing foam based solutions.
• **Disposable:** No need for cleaning or processing after use. Can be recycled.
• **Risk of Work Related Injury:** Health care professionals do not need to lift/handle the obese patient.
• **Smaller Inventory Footprint:** Single use product resides on a mobile cart. No need to store or handle bulky foam based solutions.
• **Lower Shipping Costs:** Compact packaging and a slender profile means more economical shipping fees.
**OXFORD HELP® SET A**
Oxford HELP® Base Pillow and Oxford HELP® Headrest for all inductions including potentially difficult airways, high BMI and obstetrics as well as ICU, A&E, radiology, regional anaesthesia and post-anaesthetic patients. Remember! Place all obstetric patients on the HELP® in case of sudden conversion from CSE to GA.

**OXFORD HELP® SET A PLUS**
Oxford HELP® Base Pillow, Oxford HELP® Headrest and the Oxford HELP® Plus Pillow. This set includes an extra pillow for very high BMI patients (typically 50+) who require increased elevation in order to achieve correct alignment of the suprasternal notch and the tragus. The Oxford HELP® Plus Pillow should never be used alone.

**OXFORD HELP® SET AXL**
Oxford HELP® Base Pillow, Oxford HELP® Headrest, a pair of Extra Large Arm Retainers and a Tube Holder. This system is ideal for high BMI patients who require interventional procedures in cardiology and radiology.

**OXFORD HELP® SET B**
This set includes the Oxford HELP® Base Pillow, Oxford HELP® Headrest, Oxford Arm Supports with straps and the Oxford Sinus knee support. The Oxford Arm Supports allow the arms to be abducted during surgery without incurring any strain to the brachial plexus due to elevation. The Oxford Sinus knee support improves patient comfort and helps prevents neural injury due to hyper-extension of the knee.

**OXFORD HELP® SET BL**
This system has been developed for urology and gynaecology. The addition of the OXH295 Oxford Semi Sinus provides extra protection for larger BMI patients in lithotomy.

**OXFORD HELP® SET C**
This set includes the Oxford HELP® Base Pillow, Oxford HELP® Headrest, Oxford Arm Supports, Oxford Sinus and the Oxford HELP® Plus Pillow for very high BMI patients undergoing surgery. The inclusion of the Oxford HELP® Plus Pillow makes this system one of the most versatile.
OXFORD HELP®
Head Elevation Laryngoscope Pillow

OXFORD HELP® SET D
This set includes the Oxford HELP® Base Pillow, HELP® Headrest, Oxford Arm Supports, Oxford HELP® Plus Pillow and Oxford Sinus, as well as the Oxford Arm Supports Plus for added height to avoid strain to the brachial plexus. It also includes the Oxford Cuneos, small wedges to give support behind the shoulders where excess adipose tissue between the scapulas prevents the shoulders from lying flat. This set provides full support for hyper obese patients, ensuring optimal physiology and eliminating risk of neural damage.

OXFORD HELP® HEADREST
Provides maximum patient comfort and optimal positioning for intubation and spontaneous respiration.

OXFORD HELP® BASE PILLOW
The Oxford HELP® Base Pillow is a patient elevation pillow and an integral part of the Oxford HELP® systems.

OXFORD HELP® PLUS PILLOW
The Oxford HELP® Plus Pillow is placed on top of the Oxford HELP® Base Pillow where very high BMI patients require further elevation.

OXFORD ARM SUPPORTS
The Oxford Arm Supports are placed on standard operating table arm boards to ensure the brachial plexus is not under strain during elevation. Each pair come with four straps.

ARM STRAPS
Pack of four arm straps compatible with all Oxford Arm Supports and boards.

OXFORD ARM SUPPORTS PLUS
These versatile pads can be used wherever a patient is at risk of pressure injury. They are conventionally placed on top of the Arm Supports where very at risk patients require further protection during abduction of the arms.
OXFORD HELP®  
Head Elevation Laryngoscope Pillow

OXFORD SINUS  
This knee support increases patient comfort during extended periods in a supine or elevated position and reduces the risk of neural injury due to hyper-extension of the knee.

OXFORD SEMI SINUS  
This knee support is typically used when patients are in the lithotomy position.

OXFORD CUNEO  
Versatile small wedge for extra support and neural protection behind shoulders, between table attachments, etc. Provides wrist flexion for arterial line insertion.

PRODUCT  | ORDER CODE
--- | ---
OXFORD HELP® SET A | OXH300
OXFORD HELP® SET A PLUS | OXH350
OXFORD HELP® SET A XL | OXH325
OXFORD HELP® SET B | OXH400
OXFORD HELP® SET BL | OXH450
OXFORD HELP® SET C | OXH500
OXFORD HELP® SET D | OXH600
OXFORD HELP® HEADREST | OXH189
OXFORD HELP® BASE PILLOW | OXH193
OXFORD HELP® PLUS PILLOW | OXH186
OXFORD ARM SUPPORTS | OXH762
ARM STRAPS | OXH191
OXFORD ARM SUPPORTS PLUS | OXH200
OXFORD SINUS | OXH195
OXFORD SEMI SINUS | OXH295
OXFORD CUNEO | OXH196
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<td>–</td>
<td>1.2mm</td>
<td>2.0mm</td>
<td>2.8mm</td>
<td>2.2mm</td>
<td>2.8mm</td>
<td>3.3mm</td>
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<tr>
<td>Length of Insertion Part</td>
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<tr>
<td>Angulation Scope</td>
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<tr>
<td></td>
<td>Down 210°</td>
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</tr>
</tbody>
</table>
REUSABLE Bronchoscope

Suction Button Fixture
Firmly fasten the suction button.

Passive Bending
210° up and 130° down with passive bending: smooth bronchial advancement and less mucosal injury.

Left/Right Rotation
Facilitates bronchial orientation and less fatigue.

Multi-function Buttons
Capture, record, freeze, zoom in/out.

CMOS + LED Technology

Portable

Application
Pneumology: bronchoscopy, peripherol observation and interventional therapy.

<table>
<thead>
<tr>
<th>Model</th>
<th>Insertion Tube (mm)</th>
<th>Channel (mm)</th>
<th>Working Length (mm)</th>
<th>Bending (Up/Down)</th>
<th>Rotation (Left/Right)</th>
<th>Field of View</th>
<th>Depth of Field (mm)</th>
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<tr>
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<td>BR-1242</td>
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<td>BR-1249</td>
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<td>610</td>
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<td>120°/120°</td>
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<td>180°/130°</td>
<td>120°/120°</td>
<td>120°</td>
<td>3-50</td>
</tr>
</tbody>
</table>
When time is critical, make your go-to device the Lateral Medical VLM. Ideal for demanding OR, ED, and ICU settings, the VLM provides a consistently clear view of the airway, and enhanced maneuverability enabling fast intubations.

The VLM system gives you a choice of 8 reusable blades and 5 disposable blades to cover a wide range of patients - from infant to morbidly obese.

Add real-time recording and an onboard tutorial, and you’ll see why Lateral Medical VLM is the one you go to for advanced video laryngoscopy.

**VLM=ADVANCED AIRWAY VIEWS**
- Digital color monitor with LCD-quality resolution
- Reusable video laryngoscope with digital-resolution camera
- Innovative blade sizing, angulation, and camera positioning
- Reveal™ anti-fog feature, with a rapid heating profile to resist lens clouding and secretions

**VLM=ADVANCED USER FEATURES**
- Integrated, real-time recording helps confirm tube placement and facilitate teaching
- Ergonomic design and rugged construction for multiple clinical applications
- Reusable blades in 8 sizes: MILLER 00, 0, 1, MAC 1,2,3,4,5
- Also available in 5 single-use sizes
VLM
Video Laryngoscope Trolley

**APPLICATIONS**
- First-use intubations, replacing direct laryngoscopy
- Normal or restricted oropharyngeal views
- Cormack-Lehane Grades I–IV laryngeal views
- Trauma airways—excellent when dealing with blood and secretions in the airway
- Video-guided tube exchange in the ICU

**SYSTEM COMPONENTS**
- Digital, LCD-quality color monitor
- Reusable video laryngoscope with digital camera
- Reusable VLM blade in a choice of 8 sizes
- Lateral Medical Rigid Stylet
- Choice of mobile stand or IV pole mount
- In-Service CD including User’s Manual and Quick Reference Cards

---

**REUSABLE SYSTEM**

<table>
<thead>
<tr>
<th>MILLER00</th>
<th>MILLER0</th>
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<th>MAC1</th>
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**DISPOSABLE SYSTEM**

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<td><img src="image" alt="MAC4" /></td>
<td><img src="image" alt="MAC5" /></td>
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</tbody>
</table>

**ACCESSORIES**

**MOBILE STAND**
A stand-alone configuration for use in a variety of hospital settings
Power source: battery and/or AC power
Also available in IV Pole Mount

**RIGID STYLET**
The angle of the stylet complements the unique angle of Lateral Medical instruments
For use with endotracheal tubes 6.0 mm and larger
Recommended to facilitate successful intubations.

Note: System configurations vary. *The MAC 5 is designed to accommodate anatomical anomalies sometimes associated with bariatric patients.*
VLM
Video Laryngoscope Hand Held

All Size Blades In One Unit
SINGLE-USE VIDEO LARYNGOSCOPE
ADVANCE FEATURES

• All New 3 Blades Design
• Fully Disposable blade for No Cross-Contamination
• 60 degree blade angle to reduce the lift force and the intubation time
• Clear View, Chip on the Tip Technology, to get clear glottis view
• Real Time Snapshot and Video Recording to Confirm the Tube Placement and Education
• Anti-fog Technology, Rapid Heating and Resisting Lens Frogging
• Providing Better Maneuverability and Working Space for Routine and Difficult Intubation
• Blade Size Continue to Expanding for Wide Array Clinical Demands
• External monitor connection capability for education and observation

• One cable for all blades
TITANIUM REUSABLE VIDEO
Laryngoscopes VL4D-EX

THE TITANIUM SYSTEM
ADVANCE FEATURES
• All New 3 Blades Design
• Construction for Thinnest and Toughest
• IPX8 Waterproof Blade Design for Disinfection and Sterilisation
• Construction for Light weight and Streamlined
• Clear View ,Chip on the Tip Technology, 2M Pixel full Color Camera and Monitor
• Real Time Snapshot and Video Recording to Confirm the Tube Placement and Education
• Anti-fog Technology ,Rapid Heating and Resisting Lens Frogging
• Titanium Providing Better Maneuverability and Working Space for Routine and Difficult Intubation
• Blade Size Continue to Expanding for Wide Array Clinical Demands
• External monitor connection capability for education and observation

VIDEO MONITOR
LCD HD Display 1024 x 768 RGB
Monitor: 8 inch (20 cm)

VIDEO CABLE

RIGID STYLET
For use with endotracheal tubes 6.0 mm and larger. Recommended to facilitate successful intubations.

MOBILE CART

• One cable for all blades
Repeated attempts at intubation are known to be associated with patient morbidity so it is important to get it right first time. ProVu Video Laryngoscope has been designed with leading anaesthetists to help achieve first time intubation success in both routine and difficult airway situations.

More Available Space
At 12mm thickness, the ProVu Video Laryngoscope blade improves visualisation of the airway, and increases manoeuvrability and working space, reducing the risk of dental trauma.

Ultimate Confidence & Control
The ProVu single-use handle provides significant grip and comfort, with reduced height to facilitate difficult intubation particularly for situations with limited neck movement and obesity.

Optimal View
Achieve the optimal screen viewing angle for you and the team, improving efficiency and decision making.

Single-use safety
The handle and blade of ProVu Video Laryngoscope is a single-use device, reducing the risk of cross-infection, reprocessing costs, time and storage.

100% All Metal Blade
Specially engineered metal blade provides the confidence needed for direct and video laryngoscopy.

Anti-Fog Design
The internally mounted Anti-Fog design reduces the need for warm up time and allows users to intubate quickly with a clear view.
Visualisation of the airway has never been easier, with the ProVu Intubation Station with options to use a 8.75cm or 20 cm screen. The all in one place intubation workstation.

ProVu displays are engineered with the latest technology, giving a crystal clear, ultra high quality image. 20cm or 8.75cm display options provide flexibility to the clinical situation and setting.

The landscape orientation of the display provides clear anatomical and airway device visualisation, enabling minute adjustments to positioning, ensuring an accurate and successful placement.

20cm display allows up to 3.5 hours of continuous use with on-screen battery capacity indicator.

THE COMPLETE SOLUTION
Adapt To Your Environment
The Macintosh blade is the same shape and profile of the successful and reliable BriteBlade Pro, ideal for routine intubation, but with the advantages of video technology to aid intubation.

The shape, profile and angulation of the Hyper Blades provide a superior view of the glottic opening without having to align the oral, pharyngeal and laryngeal axis reducing the need for lifting pressure and potential for trauma to the patient. Ideal for difficult, anterior airways and patients with restricted neck movement.

### SINGLE-USE PROVU VIDEO LARYNGOSCOPE BLADES

<table>
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<th>DESCRIPTION</th>
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<tr>
<td>040-08-0110</td>
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<td>040-08-2130</td>
<td>ProVu Single Use Video Laryngoscope Handle with Hyper Angulated Blade Size 3</td>
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### REUSABLE DISPLAYS & MOUNTING ACCESSORIES

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<td>040-07-0035</td>
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<td>040-07-0080</td>
<td>ProVu 20cm Display + Charging Cable + 2m Amplifier Cable</td>
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<td>038-990-101</td>
<td>ProVu Display Pole Stand and Articulating Arm</td>
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<td>038-990-104</td>
<td>ProVu Articulating Arm</td>
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<td>038-990-100</td>
<td>ProVu Single Use Wrist Holder for 8.75cm Display</td>
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<td>038-990-102</td>
<td>ProVu Display Table Stand</td>
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### REUSABLE CHARGERS AND CABLES

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<td>ProVu Universal Reusable 2m Amplifier Extension Cable</td>
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<td>038-990-013</td>
<td>ProVu Dual Micro USB 1.0m Charging Cable</td>
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<tr>
<td>038-990-010</td>
<td>ProVu Charging Dock for 8.75cm Display</td>
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</tbody>
</table>

References
2 Lowman W. Bacterial contamination of re-usable laryngoscope blades during the course of daily anaesthetic practice. SAMJ, June 2013.
In any scenario, the ProVu Intubation Station provides you with the ability to instantly obtain the optimum viewing position with its articulating arm.

- **ADJUSTABLE HEIGHT RANGE:**
  - 107cm – 152cm
- **REACH:** 65cm
- **EASY TO DECONTAMINATE**

**PROVU 3.5” DISPLAY & WRIST STRAP**

The wearable 3.5” display offers a live, in-line view putting you in the driving seat.

- **FITS COMFORTABLY**
  - to the contours of your wrist
- **OFFERS A UNIQUE**
  - in-line view
VENTILATOR

Evone Mechanical Ventilator  56
Tritube Ultrathin Ventilation Tube  58
Evone has the patented ventilation mode FCV®, FCV® is unique in creating a stable gas flow into and out of the patient’s lungs to generate an inspiration and expiration, respectively.

FCV® is a dynamic ventilation mode, without pauses, aiming for linear changes in both volume and pressure. FCV® prevents abrupt intrathoracic pressure drops by means of the controlled expiration.

Further, Evone has a Jet mode providing Jet Ventilation.

Applications:
- ENT/Laryngeal/Tracheal surgery
- Cardio-thoracic surgery
- One-Lung ventilation
- Laparascopic surgery/Trendelenburg position
- Procedures involving obese patients
- (expected) Difficult airway

Tritube® and conventional tubes

Evone’s FCV® ventilation mode can be used with Ventinova’s Tritube, an ultrathin endotracheal tube (outer diameter 4.4 mm) with an inflatable cuff to secure the airway. Also any adult endotracheal tube (>5 mm ID).

ADVANTAGES
- Better gas exchange
- Improved lung recruitment and less atelectasis
- Exceptional in upper airway surgery
- FCV® Ventilation using:
  - Conventional tubes
  - Ultrathin Tritube®
- Two ventilation modes:
  - FCV®
- Less energy dissipation in the lungs

REDEFINING VENTILATION
- Small Lumen
- Higher Efficiency
- Lower Energy
Evone: Controlled inspiration and expiration
Evone is the only commercially available ventilator applying FCV®, directing both the inspiration and the expiration of an anesthetised patient requiring mechanical ventilation. Evone’s FCV® ventilation mode is based on a controlled inspiration and expiration flow from a set PEEP to a set peak pressure and vice versa, relying on intratracheally measured pressures.

Order information
All products are single use and sterile.

» SMALL LUMEN
- FCV® enables use of ultrathin cuffed endotracheal tube Tritube® (O.D. 4.4 mm):
  - New surgical possibilities
  - Easy intubation of even difficult airways
  - Increased surgical exposure
  - Clear sight and non-vibrating vocal cords
  - Minimised contamination risk

» HIGHER EFFICIENCY
- FCV®’s low flow rates are better able to reach the high resistant and the dependent lung parts, that have a better perfusion.
- FCV®’s control of the expiration maintains airway pressure and keeps the gas longer in the alveoli.
- Together, FCV® avoids atelectasis while improving gas exchange.

» LOWER ENERGY
- FCV® results in smooth tidal movements of the diaphragm and thoracic wall throughout the ventilation cycle.
- FCV® results in reduced application of mechanical power and less energy dissipation in the lungs.

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With an outer diameter (OD) of only 4.4 mm, Tritube is an ultrathin ventilation tube, intended to obtain endotracheal access to the airway and to ventilate patients > 40 kg. Tritube can exclusively be used together with Evone® or Ventrain®.

**Applications:**
- Laryngeal surgery
- Tracheal surgery
- Tracheostomy

Tritube has three lumen:
- A ventilation lumen - with Murphy eye and an inner diameter (ID) smaller than 3 mm;
- A cuff lumen - to inflate and deflate the high volume, low pressure cuff;
- An intratracheal pressure measurement lumen - for continuous intratracheal pressure measurements.

Tritube (including its cuff) is completely manufactured of high-quality Polyurethane (PU). Moreover, Tritube has a malleable stylet to facilitate intubation.

**ADVANTAGES**
- More space during elective surgery
- Minimised contamination risk
- Easy access to the airway
- Continuous Intratracheal pressure measurement via pressure lumen
- No vibration of vocal cords
- Continuous capnometry
- Malleable stylet to facilitate intubation

**REDEFINING VENTILATION**
- Small Lumen
- Higher Efficiency

Tritube OD of only 4.4 mm ( < 3 mm ID) **versus** Conventional tubes
Glottic visibility for laryngeal surgery
Tritube increases surgical exposure as compared to micro laryngeal tube size 6 as it conceals significantly less laryngeal area (dashed lines).

Safe tracheostomy
Tritube allows safe surgical tracheostomy with minimised aerosol generation while providing continuous ventilation. While conventional tracheostomy is a highly aerosol generating procedure, introduction of Tritube and FCV® ventilation using Evone uniquely allows the placement of a transtracheal cannula in a sealed airway.

Order Information

**Evone®**
- **Evone Control Unit**
  - Order number: 6000

**Trolley**
- Order number: 18030

**Consumables**
- **Ventrain (Box of 5)**
  - Order number: 2618200
- **Cartridge**
  - Order number: 6115
- **Airway Adapter**
  - Order number: 6125
- **Filter**
  - Order number: 12012
- **Conventional Tube Adapter**
  - Order number: 6130

**Consumables**
- **Breathing Tubing**
  - Order number: 6120
- **Tritube®**
  - Order number: 7000

**» SMALL LUMEN**
- FCV® enables use of ultrathin cuffed endotracheal tube Tritube® (O.D. 4.4mm):
  - New surgical possibilities
  - Easy intubation of even difficult Airways
  - Increased surgical exposure

**» HIGHER EFFICIENCY**
- FCV®’s low flow rates are better able to reach the high resistant and the dependent lung parts, that have a better perfusion.
- FCV®’s control of the expiration maintains airway pressure and keeps the gas longer in the alveoli.
- Together, FCV® avoids atelectasis while improving gas exchange.
CICO
(CAN’T INTUBATE, CAN’T OXYGENATE)

Ventrain Small Lumen Ventilation  61
Cricath  63
Ventrain®
For Small Lumen Ventilation

Ventrain®

Ventrain is a single-use hand-held ventilation device based on a fundamentally new ventilation principle: Expiratory Ventilation Assistance (EVA®). Dedicated to help you manage difficult airway situations Ventrain is easy in use as inspiration and expiration are initiated by using just a thumb. Ventrain supplies O₂ during inspiration and actively removes the expiratory gases. The latter significantly reduces the risk of barotrauma and circulatory collapse and results in proper CO₂ clearance from the lungs.

Applications:
- Cannot Intubate Cannot Oxygenate (CICO)
- Bridging for intubation or extubation
- Laryngeal procedures
- Emergency situation in pediatrics

Cricath® and Tritube®

Ventrain in combination with the transtracheal catheter Cricath® or endotracheal cuffed tube Tritube® re-establishes adequate oxygenation levels quickly as an I:E of 1:1 and a minute volume of respectively 7-7.5 L/Min can be obtained. Depending on the situation both can be used in difficult airway situations.

» ADVANTAGES
• Effective and safe ventilation of obstructed airway through a small lumen:
  - Effective Oxygenation
  - Effective CO₂ reduction
• Usable from pediatric to adult
• Saves lives in CICO situations
• Driven by gasflow not electricity
• Through Luer-lock also usable with other (difficult) airway catheters
• Connection for side-stream capnometry

» REDEFINING VENTILATION

Small Lumen

Higher Efficiency
### Ventilation principle

To use Ventrain you only need \( \text{O}_2 \) or a mix of \( \text{O}_2 / \text{Air} \) from a high pressure gas source, with a pressure compensated flow meter. The technology enables active inspiration by gasflow AND active expiration by suction (Venturi principle).

![Diagram of Ventrain](image)

The mechanism of EVA is shown by the cross section of Ventrain above:

1. Inlet hose connection to hospital \( \text{O}_2 \) gas flow
2. Narrow diameter to increase gas velocity
3. Outlet gas flow
4. Connection to patient
5. Equilibration

### Order information

All products are single use and sterile.

<table>
<thead>
<tr>
<th>Ventrain (Box of 5)</th>
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Cricath is a cricothyrotomy catheter with an ID of 2.0 mm, especially designed to be used with Ventrain.

In an emergency situation, often ‘Cannot Intubate, Cannot Oxygenate’, Cricath offers rapid access to the trachea, by means of a needle cannula cricothyrotomy technique. Using Cricath in combination with Ventrain is key to rapidly and safely re-oxygenate and ventilate.

**ADVANTAGES**
- Saving lives in CICO situations
- Minimally invasive
- Easy insertion
- Easy access to the airway

**REDEFINING VENTILATION**
- Small Lumen
- Higher Efficiency

**Effective ventilation of a patient with an obstructed upper airway with Ventrain**

**Saving lives in CICO situations**

**Ventrain has a connection for side-stream capnometry**
VENTILATOR Breathing Systems

Non-Invasive Ventilation (NIV) Sterile

Respiratory Humidifier

Ventimask and Humidity Adaptor

Non-Invasive Ventilation (NIV)

High Flow Oxygen Therapy (HFOT)

Standard Non-Heated Wire Ventilator Breathing Systems

Heated Wire Ventilator Breathing Systems - Sterile

Heated Wire Ventilator Breathing Systems

Peep Valve
BREATHING Filters

Electrostatic

LuerSafe

HMEFs

HepaShield

HMEs

Neonatal HME and HMEF

Tracheostomy HMEs

Combi Sets

Pulmonary Function Test Filters
# Epidural Solutions

<table>
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<tr>
<th>Product</th>
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<tbody>
<tr>
<td>Epidural Patient Positioner</td>
<td>67</td>
</tr>
<tr>
<td>EpiHug</td>
<td>68</td>
</tr>
<tr>
<td>EpiFaith</td>
<td>69</td>
</tr>
<tr>
<td>ACCURO NEURAXIAL NAVIGATION</td>
<td>75</td>
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</tbody>
</table>
Designed by an anesthesiologist that positions patients correctly and comfortably by encouraging cervical, thoracic and lumbar flexion while maintaining a solid and stable position. Manually controlled chest, arm and head support ensures that patients of every body type and size can be accommodated and the back remains immobile during epidural placement.

Increase your efficiency in operating rooms, labor and delivery suites, pain centers, and anywhere epidurals and spinals are performed. The Epidural Positioning Device (EPD) allows you to position patients correctly and comfortably by encouraging cervical, thoracic and lumbar flexion while maintaining a solid and stable position. The chest is amply supported to stabilize the back.

**Patient Positioning made simple for Spinals and Epidurals**

- Patients remain safe and secure during procedure
- Easily Manipulated by staff
- Easily Rolled into position
- Easily Moved from patient to patient
- Small foot print
- Easy to clean and adjust
- No pinch points
- Holds patients securely in place with secure points for patients face, arms and feet
- Medical Gel face rest and armrest pads for protection and comfort
- C-Arm friendly
EpiHug is an ergonomic foam pillow designed to facilitate optimal patient positioning for neuraxial anesthesia and improve patient comfort and safety. Its durable construction is made with sustainability in mind. EpiHug is firm enough to provide patient support and stabilization while remaining soft enough to allow the patient to comfortably “hug” the device to reduce procedural anxiety.

EpiHug Pillow

Improves patient satisfaction through the following:

• Proper positioning improves accuracy of injection.

• Stability minimizes movement, increases safety and reduces anxiety.

• Ergonomic curves front and back provide comfort.

• Arm and head rest surfaces provide support and comfort.

• Designed in consultation with an MD anesthesiologist.

• Ergonomically designed to fit a wide range of patient sizes.

• Reusable low environmental impact

“By far the best positioning device for epidurals and spinalis in a busy labor and delivery unit. Durable, functional and comfortable. It consistently places parturients in the ideal position for neuraxial anesthesia.”

“Durable, functional, and comfortable”

“Positioning is key for safety, speed, and success in neuraxial anesthesia”

— STEPHEN GARBER, MD, OBSTETRIC ANESTHESIA

Specifications:

- Urethane foam structure
- Skinned foam exterior for easy cleaning with disinfecting wipes
- 18” x 24” x 8” in / 460 x 610 x 203 mm
- 8 lbs / 3.6 kg
- Designed & Manufactured in USA
- US Patent
- International Patent Pending
EpiFaith®, a compact and robust device, assists physicians in locating the epidural space. Intuitively equipped with the Faith Signal visual indicator upon reaching the epidural space, EpiFaith® is beneficial to both junior and senior physicians by transforming the process into a safe and convenient procedure.

**Faith Signal**

EpiFaith® provides real-time objective and quantitative pressure information. A visual signal is triggered at the exact moment the needle tip enters the epidural space, indicating a clear endpoint for the advancing of the needle.

**Intuitive Control**

By pushing/pulling the plunger to start/stop pressure sensing, EpiFaith® can easily be controlled and monitored by physicians, allowing them to use two hands to advance the needle.

**Feasibility**

Equipped with NRFit or Luer connectors, EpiFaith® is compatible with both cutting-edge or mainstream products used in epidural procedures, allowing physicians to maintain their current practices when transferring to EpiFaith®.
I.V. ACCESS

Vivolight Vein Finder  71
Airglove Warming Device  73
Bendable Arm Board  74
V800P PROJECTION VEIN FINDER
Accurate/Efficient/Portable/Safe

Principle
The Projection Vein Finder V800P based on the principle that human hemoglobin has a higher absorption of infrared light than other tissues. With our enhanced imaging processing unit, up to 80% invisible veins can be detected. The processed vein image is synchronously and precisely projected back on to the skin.

Different Modes

- Basic Mode
- Photo & Storage
- Green Light Mode

Different Parts
- Elbow
- Hand
- Forearm
- Neck
- Face

Benefits

- Accurate: Alignment accuracy ≤ 0.5mm
- Visualized: DLP real-time in situ display
- Portable: Compact and convenient
- Safe adopt: Near infrared light
- Clinical evidence: Image capture & saving

Highly recommended by INS Infusion therapy standard practice

22.1 To ensure patient safety, the clinician is competent in the use of vascular visualization technology for vascular access device (VAD) insertion. This knowledge includes, but is not limited to, appropriate vessels, size, depth, location and potential complications.

22.2 Vascular visualization technology is used in patients with difficult venous access and/or after failed venipuncture attempts.

22.3 Vascular visualization technology is employed to increase the success with peripheral cannulation and decrease the need for central vascular access device (CVAD) insertion, when other factors do not require a CVAD.

Parameters
- Operation mode: Seven working modes
- Brightness: Adjustable (four levels)
- Light source: Near-infrared light
- Net weight: 350g
- Dimension: 228mm x 63mm x 62mm
- Battery standby time: ≤4.5h
- Optimal imaging distance: 210mm ± 30mm

Projection Vein Finder reduces the first venipuncture failure rate by 77.5%, and the infiltration rate by 61.4%.

--Clinical data from a comparative study of 360 cases. The results of this study had been published on Journal of Nursing Administration, September 2015.
Principle
The Projection Vein Finder V800F is based on the principle that human hemoglobin has a higher absorption of infrared light than other tissues. With our enhanced imaging processing unit, up to 80% invisible veins can be detected. The processed vein image is synchronously and precisely projected back on to the skin.

Different Modes

Benefits

Accurate
Alignment accuracy ≤ 0.5mm

Visualized
DLP real-time in situ display

Portable
Compact and convenient

Safe adopt
Near infrared light

Clinical evidence
Image capture & saving

Highly recommended by INS Infusion therapy standard practice

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Clinical data from a comparative study of 360 cases. The results of this study had been published on Journal of Nursing Administration, September 2015.
Airglove is a unique warming system developed to enable access to the veins in a patient's arm for the delivery of intravenous drugs. It gently heats the patient's arm up as it forces warm air through a double-walled polythene glove.

**Proven Patient Solution for Venous Access**

**Patient Solution**

Airglove warming system works in just 3 minutes gently heating the patient's arm to the selected temperature. It's so easy to use the nurse/practitioner simply selects the chosen temperature setting according to the patient's skin type, places the patient's arm in the double-walled polythene glove and selects start. The patient will feel the warm air fill the glove up and vent away through a single slit perforation and after 3 minutes the machine will automatically stop with an alert sound.

**Patient Safety**

No more improvisation with warm water, heat packs or even heated towels to try and gain access to patients' veins which can be a Health & Safety issue. Airglove is a fully approved medical device which gives precise thermal regulation in 3 minutes.

**Experience the Advantage of Airglove in 3 Minutes**

**Temperature Settings**

The temperature can be selected to suit each skin type sensitive, normal or slightly heavier with the Airglove automatically re-setting itself to normal skin type (setting 2) after each use. After 3 minutes the Airglove unit automatically switches off with an alert sound.

**Setting 1**

The timer is pre-set at 3 mins for sensitive skin types at a temperature of 31.5°C.

**Setting 2**

The timer is pre-set at 3 mins for normal skin types at a temperature of 35.5°C.

**Setting 3**

The timer is pre-set at 3 mins for slightly heavier skin types at a temperature of 38.5°C.
The Dale Bendable ArmBoard is a simple cost effective, tapeless, means to position and secure the wrist to prevent unwanted movement when using arterial and peripheral (intravenous) lines. The ArmBoard is covered in a soft comfortable material and is fastened to the arm with adjustable hook and loop straps. The ArmBoard can be custom shaped to any position.

- limits movement of arterial and other peripheral lines
- easily shaped to desired position
- allows hyperextension of wrist to enhance radial arterial exposure
- adjustable closures and soft material assures fit and comfort

Can be used in the
- Operating Room
- Recovery Room
- ICU
- Patient Care Units

MRI Information
The Dale Bendable ArmBoard is safe to use on patients undergoing MRI under specified conditions.

<table>
<thead>
<tr>
<th>Size</th>
<th>Dimensions</th>
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<tr>
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<tr>
<td>X-Small</td>
<td>10.8cm x 2.5cm</td>
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</tbody>
</table>
Improve the Safety, Speed and Efficiency Of Epidural And Spinal Anesthesia

Get rapid identification of spinal mid-line and epidural depth location with Accuro®.

Accuro®

Certainty Can Be Effortless.

Now epidural and spinal anesthesia can be administered faster and more precisely than ever before. The Accuro spinal navigation device automatically identifies spinal mid-line, trajectory, and depth during neuraxial anesthesia and is superior to ‘blind’ palpation irrespective of provider experience, as demonstrated in randomized controlled trials.

PROVEN CLINICAL BENEFITS *

48% Reduction in needle redirects

57% Reduction in needle insertion time

57% Overall patient satisfaction

Reduce risk of complications and placement failures

Save time and money

Improve patient satisfaction
Automated Epidural Guidance

Accuro’s state-of-the-art image guidance technologies include BoneEnhance®, which improves bone visualization, and SpineNav3D™, which guides you with real-time automatic spinal landmark detection.

AUTOMATED EPIDURAL GUIDANCE FOR IMPROVED FIRST-ATTEMPT SUCCESS*

*Singla et al 2019

First-attempt success.

Accuro is an easy-to-use device that delivers superior performance when administering epidural and spinal anaesthesia. That means you achieve improved localization of the desired intervertebral space for first-attempt success when you perform neuraxial anaesthesia-related procedures. In turn, you improve the efficiency of your practice, the quality of your medical care, and the confidence and comfort you instill in your patients.

Wherever you go, Accuro can go.

Because Accuro is about the size of a smart phone and battery operated, you can take it with you to use no matter where your patient happens to be. It’s handheld and untethered, and the touch screen can be rotated for easy viewing.

You don’t have to be a sonographer to use Accuro.

Accuro guides you with automatic epidural location and depth interpretation, so you don’t have to be an expert at reading an ultrasound to benefit from this technology.
ACCURO
Certainty Can Be Effortless

The Latest Advancement In Spinal Guidance Technology Is Small – And Mighty.

Accuro’s patented image guidance visualizes bone landmarks and guides you with automatic epidural location and depth.

Understanding Accuro: the overlays and automated depths.
- Orange overlay means interlaminar space cross-section is detected
- Orange number is the depth to the articular process
- Cross-hair in 3D spine image is over the interlaminar space

How to use Accuro: Disposable kits (single-use only!)

Locator-only kits (item #4742):
- Supports non-sterile pre-procedural “scouting technique”

Sterile cover + Locator kits (item #4741):
- Supports sterile technique for optimal success
- Recommended, especially in more challenging patients

The Latest Advancement In Spinal Guidance Technology Is Small – And Mighty.

SEE more than 5X* enhancement of bone-to-tissue contrast with BoneEnhance® image reconstruction technology.

FIND the ideal insertion point with Midline (red dashed line) and Cross Hair indicators.

AUTOMATICALLY IDENTIFY epidural location with success rates exceeding 94%* using SpineNav3D™ technology.

MARK needle placement by gently pressing Accuro Locator® needle guide against the skin.
NEUROMUSCULAR BLOCK & ANALGESIA MONITORING

ToFscan Neuromuscular Blockade Monitor  79
Aligiscan Pupillary Algesimeter  80
Neurolight Portable Pupillometer  81
3D accelerometry
A realistic and complete measurement of the evoked muscle responses is achieved with 3D accelerometry. The user obtains objective results for the quantitative stimulation modes. The ToFscan provides the most reliable way to ensure the absence of residual neuromuscular block.

Adapted to different stimulation sites
The ToFscan has a range of four specific sensors to monitor different sites and it requires no calibration. The shape of the sensors has been designed to ensure result accuracy while it allows easy positioning.

Simple and ergonomic
While integrating innovative technology the ToFscan is simple to use. Plugged in or battery operated it is an autonomous and mobile device. The clamp secures its fixing on supports and protects it against the risk of fall. The general design, the screen and the one wheel-button selection makes the ToFscan user-friendly and easy for anyone to handle.

The ATP mode ensures a simplified and continuous monitoring of blockade, from induction to complete reversal of the patient. It is an automated and useful mode combining TOF and PTC.

Clinical
Stimulation
- TOF (Train Of Four)
- Automatic TOF
- ATP (Automatic TOF-PTC)
- PTC
- DBS (3.3, 3.2)
- Single Twitch (0.1 ; 1 Hz)
- Tetanus 50 Hz

Measurements
(3D accelerometry)
- TOF mode : T4/T1
- TOF mode : T4/Tref
- TOF mode : count
- PTC mode : count
- DBS mode : count

Ergonomics
- 3D accelerometer sensor
- Adjustable stimulation current (20-60 mA)
- Automatic switch-off
- Battery and mains operated
- Sound on/off
- Clamp
- No calibration required
- Connectable monitors: Dräger®, Philips®, Diane®, Capsule™, etc.

Norms and safety
- EN 60601-1 (Medical Electrical Equipment)
- EN 60601-1-2 (EMC)
- 2A CE Class (CE 0459)
The AlgiScan uses pupillometry technology to measure the level of analgesia of the patient in an objective way.

This method, widely published and documented has shown its relevance and its strength for the evaluation of the level of sensibility to nociception and in the prediction of the haemodynamic reactions to nociceptive stimuli. These fast and accurate measurements provide unequalled precision while protecting the eye from any lesion or drying out.

With its integrated lighting system the practitioners can carry out the routine clinical monitoring of pupil size and photomotor reflex with the added benefit of reliable measurements.

Thanks to its small size it is possible to use the AlgiScan on all types of morphology and to have an easy access to the pupil for measurement in PACU and ICU. The AlgiScan is a handheld and intuitive device for the assessment of analgesia adapted to patients in any situation.

Its reusable and autoclavable eyecups save ongoing costs. The design and the selected materials of the AlgiScan provide ergonomic and perfect comfort for the patient while suppressing the influence of ambient light on the results.

Clinical

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NEUROLIGHT
The New Era Pupillometer

SIMPLE AND PRECISE ROUTINE CHECKS FOR PUPIL SIZE AND REACTIVITY

- Quantitative measurements
- Non invasive
- Time saving

+ Ergonomic design
Ergonomic design
Easy to operate

+ Opaque eyecup to ambient light
Opaque eyecup to ambient light
Reliable and reproductible measurements

+ Large touch screen
Large touch screen
Intuitive use

+ Long lasting battery
Long lasting battery
1 week of autonomy

+ Integrated barcode reader
Integrated barcode reader
Simplified patient identification

+ Data transfer
Data transfer
Save time

+ Calibrated light stimulation
Calibrated light stimulation

+ Pupil reactivity
Pupil reactivity

+ 24h trend chart
24h trend chart

+ Anisocoria detection
Anisocoria detection

10 000 measurements

81
**OXYGEN**
And Aerosol Therapy

- Fixed Concentration
- Variable Concentration
- End Tidal CO₂ Monitoring
- Non Rebreathing Masks
- Humidification
- Post Operative
- Aerosol Therapy
- Mucus Clearance
PATIENT WARMING

Hotdog Warming Solutions  84
Hotdog Waffle Grip  89
Blood and IV Fluid Warmer  90
HotDog delivers the ABCs:

**AIR-FREE**
- Avoids airborne contamination from forced-air warming.
- 11+ studies show waste heat carries contaminants to the sterile field.

**BETTER WARMING**
- Warms above and below the patient simultaneously — far more effective.
- In multiple trials, HotDog has shown a 96.2% normothermia rate.

**COST EFFECTIVE**
- Reduce per-patient warming costs by 10 - 50%.
- Easy-to-implement solution delivers immediate and long-term cost savings.
WC71 - Single Port
Temperature Management Controller
- 21cm W x 29cm H x 18cm D
- 2.9kg
- 17.5cm Touchscreen with Intuitive User Interface
- Controls one Warming Blanket
- Temperature Monitoring*
- Integrated Slide Shows
- Positioning Guides
- Includes IV Pole Clamp
- VESA Mount Compatible (75mm)
- Integrated Self Testing

WC77 - Multiport
Temperature Management Controller
- 21cm W x 29cm H x 18cm D
- 3.2kg
- 17.5cm Touchscreen with Intuitive User Interface
- Controls up to four Warming Blankets and one Warming Mattress
- Temperature Monitoring*
- Integrated Slide Shows
- Positioning Guides
- Includes IV Pole Clamp
- VESA Mount Compatible
- Integrated Self Testing

The WC77 Multiport Controller provides maximum versatility and efficiency for patient temperature management.
**BEST Practices**

- Body Surface Area
- Early Start
- Sensor Contact
- Thin Barrier

---

**Integrated Training Slideshows**

Controllers include educational slideshows to help you get started and learn the BEST Practices.

---

**Temperature Monitoring & Auto Mode**

Temperature monitoring uses patient temperature to automatically control the warming devices.

---

**Advanced Temperature Control**

Control all warming devices individually in 1°C increments or together with the touchscreen.

---

**Positioning Guides**

Includes visual blanket guides for various surgical positions to make set-up easy for new users.

---

The “smart” controllers deliver low-voltage electricity delivered by an advanced sensor system. There is a 3-year warranty for controllers.

*Temperature Monitoring feature is CE-marked and pending FDA clearance.*
HOT DOG
Air-free Patient Warming

B500
Universal Warming Blanket

43.2cm W x 76.2cm L
0.8kg

HotDog warming blankets are lightweight, flexible, and designed to meet all of your warming needs. The outer shell is a soft, non-porous urethane embedded with an anti-microbial agent that prevents the growth of micro-organisms — designed for easy cleaning. The semi-conductive fabric produces uniform heat output over the entire surface of the blanket. Temperature is controlled from 37-43°C. The blankets have a 2-year warranty and a 30-month expiry.

HotDog can help maintain normothermia for patients of all ages. See page 6 for our paediatric product offering.

The B500 is the most advanced and versatile warming blanket. It has rounded edges for a softer touch and formable edges to maintain shape. It also includes a more flexible heater fabric for better drapability and effectiveness.
B103
Lower Body Warming Blanket
74.9cm W x 98.4cm L
1.36kg

B104
Full Body Warming Blanket
74.3cm W x 128.6cm L
1.81kg

B105
Multi-Position Warming Blanket
(Two tethered panels)
50.8cm W x 90.63cm L (x2 Panels)
1.45kg

B107
Head Warming Blanket
19.7cm W x 70.5cm L
0.54kg
**Warm & Secure**

Deliver 3.5x more warming by enabling underbody warming with the HotDog Patient Warming System.

**No Sliding**

Unique waffle pattern evenly disperses grip on patient, decreasing localized shearing forces, while increasing mechanical hold and friction.

**Technology Integration**

That Optimizes Surgical Efficiency and Safety
- Safe Trendelenburg Securement
- Patient Warming
- Easy Patient Positioning
- Short Turnover Times

---

Eleanor Markle, RN, Robotic Program Coordinator

“[WaffleGrip] is easy to use, easy to reposition, easy to educate staff and physicians on, and the warming is an additional benefit. Set-up is fast, so it doesn’t delay OR turnover. It even comes with a slide sheet, making it very easy to reposition patients... Housekeeping loves, loves, loves it!”
High accurate, intelligent microprocessor controlled device for all medical departments:

- Infusion fluids
- Blood transfusion and blood products
- Blood return feeds / dialysis fluids
- Enteral/parenteral nutrition and rinsing solutions
- Microprocessor integrated with temperature sensors provides high precise control Safety system
- Permanent running self-tests, 24 hours continuous operating
- Double independent over-heating protections and automatic cut off
- Visual and acoustic alarm for high temperature / low temperature/sensor fault Dual channels
- Each channel can work independently with own temp. setting and temp control
- Two channels can be combined to enlarge the warming capacity

Heating up to the patient: IV tube is completely wrapped in, no heat loss:

- User friendly interface
- Big LED screen showing set temp., actual temp., heating time and fault situation
- Easy and quick to set up, ready to use within minutes
- Open system
- Accepts standard IV tube, no special disposables needed
- The most economical warming solution without extra consumable costs
High performance dry heater for warming of:
- Infusion fluids
- Blood transfusion and blood products
- Blood return feeds / dialysis fluids
- Enteral/parenteral nutrition and rinsing solutions
- Microprocessor integrated with temperature sensors provides high precise control Safety system
- Permanent running self-tests, 24 hours continuous operating
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## Patient Positioning

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<td>Single Patient Use Lateral Glide</td>
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<td>Reusable Lateral Glide</td>
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<td>Prone Head Cushion</td>
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<td>Spinal Table Soft Goods</td>
<td>96</td>
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<tr>
<td>Eye Protection</td>
<td>97</td>
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<tr>
<td>Seemless Polymer Gel</td>
<td>98</td>
</tr>
</tbody>
</table>
The PPS Lift is a state of the art fall recovery device that allows caregivers to safely lift patients who have fallen

The PPS Lift is a patent protected, pneumatically controlled jacking device that utilizes a single inflation point to safely, securely and expeditiously lift patients from the floor to bed or stretcher height in a supine position, maximizing patient comfort and minimizing the risk of injury to the patient and their caregivers.

Unlike other products whose independent chambers require sequential inflation, the PPS Lift utilises a state of the art design to effortlessly inflate to maximum height from a single connection air supply. Once the PPS Lift is inflated, the PPS Glide air transfer mattress can then be used with the same air supply for safe and easy lateral patient transfer to a bed or stretcher.

Effortlessly lifts patients from the floor to bed or stretcher height.

- Minimise caregivers needed to safely lift patients who have fallen
- Weight capacity of 1200 lbs. to accommodate most patients
- Patent protected design can control inflation height through from a single inflation point
- Compatible with the PPS Glide blower
- Self-sealing inflation valve for ease of use
- Made in the USA
- Quick release deflation valve to lower patient if needed
SINGLE PATIENT USE LATERAL GLIDE
Product Features

**BLOWER UNIT**
This lightweight unit supports all three PPS Glide transfer mat sizes, for patients up to 544kg.

**EASY GRAB PULL HANDLES**
The Single Patient Use Easy Grab Pull Handles are positioned along outer edges of the matt and allows caregivers multiple options for optimal ergonomics and grip control. The Single Patient Use PPS Glide comes in 3 sizes and can be used for patients up to 544kg. It is designed to remain with the patient and provide transfer assistance throughout a hospital stay.

**LASER PRECISION FOR SUPERIOR PERFORMANCE**
The Single Patient Use PPS Glide features laser cut precision holes which provides superior glide performance and reduced push/pull forces.

**COMFORTABLE AND BIOCOMPATIBLE MATERIAL**
The Single Patient Use Glide is made from a moisture absorbent biocompatible non-woven material which provides optimal patient comfort.
REUSABLE LATERAL GLIDE

Product Features

**BACKSMART EXTENDED PULL HANDLES**
Two caregivers can laterally transfer a patient with the side rails up while maintaining an upright ergonomic posture. Cradled inflation raises the patient in one smooth motion and provides a comfortable patient experience.

Coated straps to prevent bacterial growth and easy cleaning. SOFlux OX® HF Fabric that is Anti-bacterial and Anti-Fungal.

**MACHINE WASHABLE**
The transfer mat is machine-washable, making cleaning convenient.

**AVAILABLE IN MULTIPLE SIZES**
The Reusable comes in 3 sizes. Regular, Large and Bariatric for patients up to 544kg.

**COMPACT ROLLER TOTE**
Makes transport and storage of the PPS Glide system simple.
**PRONE**
Head Cushions : Disposable (3 Options)

**PRONE Headrest**
- Positioner pillow with trach hole.
- 27.9cm x 25.4cm x 17.8cm.
- 10 per case.

**Q VIEW Head Positioning Device (HPD)**
- Designed to support not only the head, but also ensure the ET Tube is positioned and supported and also the patient’s face can be monitored by the clinician via the viewing mirror.
- 3M bio-compatible layer to avoid pressure sores.
- 15cm high x 24.5cm wide x 30.5cm long.
- Acrylic Mirror.
- Polyurethane Foam.
- Non sterile, 6 pcs per box.

**PRONE VIEW CUSHION** for ‘Cradle’
- Use with the Head Support Systems
- 10 per case.

---

**CODE: 14-3101N**  
Prone Headrest  
**CODE: QPHD-Adult**  
Q View (HPD)  
**CODE: QView-PS**  
Prone View Cushion
**ARM Cradles**
- Standard.
- 12.7cm x 60.9cm x 7.6cm.
- 10 pairs.

**CHEST Pillows**
- 35cm x 20cm x 7.5cm
- 10 per case.

**HIP & THIGH Pads**
- Fits 20cm x 27.5cm
- 40 per case.

**JACKSON Table Kit**
- Arm Cradle – Standard, 2pcs.
- Prone Headrest Positioner Pillow w/Trach hole.
- Chest Pillows.
- Hip & Thigh Pads.
- 6 (EA/CS).

- ProAxis, Wilson and Andrews Table Kits available, contact ‘Product Specialist’.
- Customisation of kits available.
Opti-Gard® Patient Eye Protectors are designed to protect eyes against trauma and unintentional contact and are latex free and self adhering for fast and accurate application.

**Laser Opti-Gard® Patient Eye Protectors**

The more barriers the better. With Laser Opti-Gard® we provide the same proven barriers to protect your patient as we have done for more than twenty years with our original Opti-Gard® Patient Eye Protector. To insure protection for laser patients and clinicians, we have added additional barriers of aluminium, foam, plastic, and the protective qualities of water to insure protection for laser patients and clinicians.

**CODE:** 028300CE  
Opti-Gard (Box of 25)  
**CODE:** 028400  
Laser Opti-Gard (Box of 10)
New Seamless Polymer Gel – Lighter and lasts longer. “Patented” seamless polymer gel – avoids premature failure of traditional sealed film gels

What is seamless polymer gel? SPG-Seamless Polymer Gel™ is a dry polymer gel product that can be cast or molded into many sizes, shapes and configurations to enhance patient comfort and positioning.

SPG-Seamless Polymer™ gel eliminates the need for the unsightly and failure-prone peripheral sealed film around the base of traditional gel positioners.

With SPG-Seamless Polymer Gel™, the gel is seamlessly encapsulated within a tough but soft, highly elastic membrane thus ensuring patient comfort, maximum body conforming support of the gel pad and, importantly, its ease of cleaning.

The patent pending technology is the result of intelligent choice of innovative materials, process options and field input.
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<th>Description</th>
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<td>SPG-5001A</td>
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<td>SPG-2004H</td>
<td>5.25OD x 6.3 x 3.8T</td>
<td>Pediatric</td>
<td>317</td>
</tr>
<tr>
<td>SPG-2005H</td>
<td>8.25OD x 4.4 x 2.5T</td>
<td>Neo-Natal</td>
<td>91</td>
</tr>
<tr>
<td>SPG-2030H</td>
<td>8.25 x 3.2 x 1.9T</td>
<td>Neo/Pedi</td>
<td>91</td>
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</tbody>
</table>
What is seamless polymer gel? SPG-Seamless Polymer Gel™ is a dry polymer gel product that can be cast or molded into many sizes, shapes and configurations to enhance patient comfort and positioning. SPG-Seamless Polymer™ gel eliminates the need for the unsightly and failure-prone peripheral sealed film around the base of traditional gel positioners.

With SPG-Seamless Polymer Gel™, the gel is seamlessly encapsulated within a tough but soft, highly elastic membrane thus ensuring patient comfort, maximum body-conforming support of the gel pad and, importantly, its ease of cleaning. The patent pending technology is the result of intelligent choice of innovative materials, process options and field input.
## SEAMLESS Polymer Gel

### Patient Positioner

<table>
<thead>
<tr>
<th>Part#</th>
<th>Dimensions (cm)</th>
<th>Description</th>
<th>Weight (g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPG-3015P</td>
<td>38 x 10 x 1.3</td>
<td>Small</td>
<td>454</td>
</tr>
<tr>
<td>SPG-3017P</td>
<td>61 x 11.5 x 1.3</td>
<td>Large</td>
<td>816</td>
</tr>
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</table>

### Universal Armrest Pad

<table>
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<th>Weight (g)</th>
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<tbody>
<tr>
<td>SPG-8009M</td>
<td>30.5 x 22.9 x 1.27</td>
<td>Flat Pad</td>
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### Axillary Rolls

<table>
<thead>
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<tbody>
<tr>
<td>SPG-9001AX</td>
<td>20.3 x 5 x 5</td>
<td>Axillary Roll</td>
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<tr>
<td>SPG-9003AX</td>
<td>30.5 x 7.6 x 7.6</td>
<td>Flat Bottom</td>
<td>1225</td>
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<tr>
<td>SPG-9005AX</td>
<td>30.5 x 10.2 x 7.6</td>
<td>Flat Bottom</td>
<td>1905</td>
</tr>
<tr>
<td>SPG-9012AX</td>
<td>30.5 x 11.4 x 3.8</td>
<td>Regular</td>
<td>907</td>
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<tr>
<td>SPG-9015AX</td>
<td>25.4 x 11.4 x 3.8</td>
<td>Regular</td>
<td>726</td>
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### Sand Bags, Flat Bottom

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<th>Dimensions (cm)</th>
<th>Description</th>
<th>Weight (g)</th>
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<tbody>
<tr>
<td>SPG-6003S</td>
<td>25.4 x 11.4 x 3.8</td>
<td>Sandbag, Sm</td>
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</tr>
<tr>
<td>SPG-6004S</td>
<td>30.5 x 11.4 x 3.8</td>
<td>Sandbag, Med</td>
<td>907</td>
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<tr>
<td>SPG-6011S</td>
<td>35.5 x 11.4 x 3.8</td>
<td>Sandbag, Lge</td>
<td>1,814</td>
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### Chest Roll, Flat Bottom

<table>
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<th>Part#</th>
<th>Dimensions (cm)</th>
<th>Description</th>
<th>Weight (g)</th>
</tr>
</thead>
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<tr>
<td>SPG-3001P</td>
<td>20.3 x 5 x 5</td>
<td>Chest Roll</td>
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<tr>
<td>SPG-3004P</td>
<td>30.5 x 10.1 x 7.6</td>
<td>Chest Roll</td>
<td>1724</td>
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<tr>
<td>SPG-3047P</td>
<td>20.3 x 5 x 5</td>
<td>Neo/Pedi</td>
<td>408</td>
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<tr>
<td>SPG-3071P</td>
<td>30.5 x 7.6 x 7.6</td>
<td>Chest Roll</td>
<td>1179</td>
</tr>
</tbody>
</table>
Advanced Airway Management
Flexicare offers a full range of single patient use and reusable resuscitator bags in three sizes of Adult, Paediatric & Neonatal. All products are supplied complete with mask, reservoir bag and star lumen oxygen tube ready to use in a sealed transparent bag with easy tear-off opening. This will save valuable time in emergencies and critical situations.

Oropharyngeal Airways (Guedel)
Flexicare offers a full range of Oropharyngeal Airways for use as an adjunct to a Bag-Valve-Mask (BVM) on unconscious patients to establish and maintain the patency of the upper airway.

Reduced Risk of Patient Rebreathing
The integrated duck bill design of the nonreturn valve prevents patients’ exhaled gases to enter the resuscitator bag, providing one way flow of fresh gas from the bag to the patient.

Eliminate Lung Over Inflation
The Pressure Relief Valve supplied with all bags opens at 60cm H2O for adults. The paediatric and neonatal valve opens at 40±5 cm of H2O. The pressure relief valve can be locked when increased pressure is required. The adult size is also available without a pressure relief valve.

User Mobility
An integrated Double Swivel Connector allows the Resuscitator bag to be rotated fully through 360° without the need to stop bagging the patient and providing the most convenient position for the resuscitator.

Positive Grip
The outer textured surface of the Resuscitator Bags provides a positive grip during resuscitation. The design of the bags allow for ease of manual ventilation with least resistance and minimal hand fatigue.

Space Saving Design
The Adult Resuscitator is supplied fully assembled in a collapsible space saving format, which is easily and quickly extendible for patient use.

Supplementary Oxygen
The bags can be connected to an oxygen source to deliver supplemental oxygen. Oxygen concentration is dependant on flow rate, frequency and tidal volume delivered to the patient.

Product Specifications for Flexicare Resuscitation Bags:

<table>
<thead>
<tr>
<th></th>
<th>ADULT</th>
<th>PAEDIATRIC</th>
<th>NEONATAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dead Space (Mask &amp; Valve)</td>
<td>168ml</td>
<td>113ml</td>
<td>46ml</td>
</tr>
<tr>
<td>Pressure Relief Valve</td>
<td>60 ±10cm H2O</td>
<td>40 ±5cm H2O</td>
<td>40 ±5cm H2O</td>
</tr>
<tr>
<td>Resuscitator Bag Volume</td>
<td>1500ml</td>
<td>550ml</td>
<td>280ml</td>
</tr>
<tr>
<td>Oxygen Reservoir Bag Volume</td>
<td>2500ml</td>
<td>2500ml</td>
<td>600ml</td>
</tr>
<tr>
<td>Stroke Volume</td>
<td>800ml (1 Hand)</td>
<td>1350ml (2 Hands)</td>
<td>350ml</td>
</tr>
<tr>
<td>Maximum Breath Per Minute</td>
<td>45 BPM</td>
<td>105 BPM</td>
<td>98 BPM</td>
</tr>
<tr>
<td>Mask Size</td>
<td>5</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Oxygen (Star Lumen Tubing)</td>
<td>3.0m</td>
<td>3.0m</td>
<td>3.0m</td>
</tr>
</tbody>
</table>

Single Patient Use Packaging
- Easy carry handle
- Clear for visual inspection before use
- Tamper proof tabs

Optional Reusable Packaging
- Robust storage box
- Clear for visual inspection before use
- Secure click lock lid and carry handle

RESUSCITATION
Adult, Paediatric and Neonatal
Resuscitation Bags
Our Single Use Resuscitator Bags are designed for manual ventilation of patients. The ready-to-use pack allows for speed and efficiency during the early critical stages of CPR.

Resuscitators - Single Use

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Quantity</th>
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</thead>
<tbody>
<tr>
<td>038-71-840</td>
<td>Adult Single Patient Use Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag</td>
<td>5</td>
</tr>
<tr>
<td>038-71-841</td>
<td>Adult Single Patient Use Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag (without pressure relief valve)</td>
<td>5</td>
</tr>
<tr>
<td>038-72-840</td>
<td>Paediatric Single Patient Use Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag</td>
<td>5</td>
</tr>
<tr>
<td>038-73-840</td>
<td>Neonatal Single Patient Use Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag</td>
<td>5</td>
</tr>
<tr>
<td>038-71-845</td>
<td>Resuscitation Pack - Adult, Paediatric and Neonatal Single Patient Use Resuscitator Bag with Masks, Oxygen Lines and Reservoir Bags</td>
<td>1</td>
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</tbody>
</table>

Resuscitators - Reusable

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>038-71-850</td>
<td>Adult Silicone Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag</td>
<td>5</td>
</tr>
<tr>
<td>038-71-851</td>
<td>Adult Silicone Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag (without pressure relief valve)</td>
<td>5</td>
</tr>
<tr>
<td>038-72-850</td>
<td>Paediatric Silicone Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag</td>
<td>5</td>
</tr>
<tr>
<td>038-73-850</td>
<td>Neonatal Silicone Resuscitator Bag with Mask, Oxygen Line and Reservoir Bag</td>
<td>5</td>
</tr>
<tr>
<td>038-71-855</td>
<td>Resuscitation Pack - Adult, Paediatric and Neonatal Silicone Reusable Resuscitator Bag with Masks, Oxygen Lines and Reservoir Bags</td>
<td>1</td>
</tr>
<tr>
<td>038-71-857</td>
<td>Reservoir Bag and Oxygen Line for Adult and Paediatric Silicone Resuscitators</td>
<td>1</td>
</tr>
<tr>
<td>038-73-857</td>
<td>Reservoir Bag and Oxygen Line for Neonatal Silicone Resuscitators</td>
<td>1</td>
</tr>
</tbody>
</table>
RESUSCITATION
Adult, Paediatric and Neonatal

Pocket Resuscitation Mask
Protect Patients against Cross Contamination with the Flexicare Single Patient Use Resuscitator Mask.

Secure Durable Carrying Case
Mask carefully protected until required - easy open release catch with printed easy-to-follow instructions.

Non-return Valve
This prevents reflux contamination whilst allowing gas escape through side vents.

Integrated Bacterial / Viral Filter
Protects both patient and resuscitator.

Pre-filled Cushion
The pre-filled cushion provides maximum seal.

Latex Free Strap
Assists in maintaining mask in secure position & eliminates risk of Latex reaction.

Built in Oxygen Line Port with Cap
Allows connection of oxygen if required; no need to change mask during transportation.

010-999 Pocket Resuscitation First Aid Mask 20
TEMPERATURE MONITORING

Non Contact Thermometer  107
Patient Monitor Sensor Solution  108
NON CONTACT THERMOMETER
Easy, Accurate & Affordable Solution

Accurate Easy Inexpensive
Product Benefits and Features
• Non-contact infrared technology – No need to touch, startle, upset or wake your patient.
• Instantly takes a reading with the press of a button, clinically accurate.
• Multipurpose – measures baby’s bottle, food, bath water and room temperature.
• Hygienic Non invasive and suitable for the whole family.

Temperature Taking Redefined
• Display changes colour to indicate raised temperature.
• Green indicates temperature measurement of 36.3°C – 37.3°C.
• Orange indicates temperature measurement of 37.4°C – 37.9°C.
• Red indicates temperature measurement greater than 38°C.
• Backlit LED display for night time use.
• Built in memory records last 32 readings.

CODE: LM178
Foley Catheter with Temperature Sensing

- Silicon construction reduce risk of urethritis
- Latex free
- Available in a wide range of sizes: 8 to 24 fr.
- Proven accuracy: ±0.1 °C (25 °C - 45 °C)
- Compatible to YSI 400 series

<table>
<thead>
<tr>
<th>Part Number</th>
<th>Description</th>
<th>Box Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.08.001.0011</td>
<td>Foley Catheter Temperature Sensor, 8 Fr.</td>
<td>10 pcs / box</td>
</tr>
<tr>
<td>1.08.001.0012</td>
<td>Foley Catheter Temperature Sensor, 10 Fr.</td>
<td>10 pcs / box</td>
</tr>
<tr>
<td>1.08.001.0013</td>
<td>Foley Catheter Temperature Sensor, 12 Fr.</td>
<td>10 pcs / box</td>
</tr>
<tr>
<td>1.08.001.0014</td>
<td>Foley Catheter Temperature Sensor, 14 Fr.</td>
<td>10 pcs / box</td>
</tr>
<tr>
<td>1.08.001.0015</td>
<td>Foley Catheter Temperature Sensor, 16 Fr.</td>
<td>10 pcs / box</td>
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<tr>
<td>1.08.001.0016</td>
<td>Foley Catheter Temperature Sensor, 18 Fr.</td>
<td>10 pcs / box</td>
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<tr>
<td>1.08.001.0017</td>
<td>Foley Catheter Temperature Sensor, 20 Fr.</td>
<td>10 pcs / box</td>
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<tr>
<td>1.08.001.0018</td>
<td>Foley Catheter Temperature Sensor, 22 Fr.</td>
<td>10 pcs / box</td>
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<tr>
<td>1.08.001.0019</td>
<td>Foley Catheter Temperature Sensor, 24 Fr.</td>
<td>10 pcs / box</td>
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</tbody>
</table>

Disposable Temperature Sensors – General Purpose

- Used for core body temperature measurement via esophagus, rectum or nasopharynx placements
- Latex free
- 2 different sizes: 9 Fr & 12 Fr
- Proven accuracy: ±0.1 °C (25 °C - 45 °C)
- YSI 400 series compatible

<table>
<thead>
<tr>
<th>Part Number</th>
<th>Description</th>
<th>Box Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.01.004.0026</td>
<td>Disposable Temperature Sensors General Purpose: 9 Fr.</td>
<td>50 pcs</td>
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<tr>
<td>1.01.004.0027</td>
<td>Disposable Temperature Sensors General Purpose: 12 Fr.</td>
<td>50 pcs</td>
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</table>
A-SETS

Key Features

DEHP / Plasticiser free
No plasticiser containing plastic anywhere in fluid/drug path – no risk of plasticiser induced toxicity

Latex free
Reduces the chance of a severe allergic reaction

Negligible common fluid space
Patented multilumen hub keeps infusions separate until distal tip of connector so helping to prevent drug/drug reactions

Lipid resistant plastics
Safe for use with lipid containing drugs e.g. propofol

Fully rotating male Luer collar
‘Self locates’ on locking and prevents line spaghetti

Gravity Line

Kink resistant gravity line
Nylon braiding built into catheter wall helps maintain free-flowing drip

Low sorbing plastic
Polyurethane catheter prevents changes in bioavailability of infused drug

Low resistance back check valve – opens with minimal pressure
Effectively prevents back flow of drugs or blood into gravity line

Drug Line(s)

Low sorbing plastic
Trilayer co-extruded catheter with polyethylene inner lining prevents changes in bioavailability of infused drug

Normally closed anti-siphon valve(s)
One way valve opens with higher crack pressure, preventing accidental overdose from siphoning from pump or syringe

Colour coded pinch clamp
Prevents accidental bolus delivery during syringe handling

Detachable long line extensions on drug line(s)
Permits exchange of pumped infusion for new drug e.g. at end of operation

Bonded (non-detachable) long line(s)
(BL-Set versions only)
Extensions on drug lines permanently fixed to set. No risk of accidental disconnection. Siamese tubing on A32BL and A33BL-Sets prevents line tangling (‘spaghetti’)

<table>
<thead>
<tr>
<th>Ref</th>
<th>A2-Set 7200A</th>
<th>A2L-Set 7200L</th>
<th>A22BL-Set 7220BL</th>
<th>A2NF-Set 7200ANF</th>
<th>A3-Set 7300A</th>
<th>A3L-Set 7300AL</th>
<th>A32BL-Set 7320BL</th>
<th>A33BL-Set 7330BL</th>
<th>A3NFV-Set 7300ANF</th>
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<tr>
<td>Gravity limb with back check valve</td>
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<td>Needle-free valve on gravity limb</td>
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<td>✓</td>
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<tr>
<td>Pump limb with white antisiphon valve and champ</td>
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<td>Pump limb with green antisiphon valve and champ</td>
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<tr>
<td>Needle-free valve on pump limbs</td>
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<td>Detachable long pump line</td>
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<tr>
<td>Fixed long pump line</td>
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<td>Siamese pump lines</td>
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<tr>
<td>7420BL</td>
<td>Quadruple Lumen Peripheral Extension Set x 2m and 1 Gravity fed line **Does not require extension lines or risk accidental disconnection</td>
<td>50</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7320BL</td>
<td>Triple Lumen Peripheral Extension Set x 2m and 1 Gravity fed line **Does not require extension lines or risk accidental disconnection</td>
<td>50</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>7220BL</td>
<td>Double Lumen Peripheral Extension Set with 2 Bonded Long Lines x 2m and 1 Gravity fed line **Does not require extension lines or risk accidental disconnection</td>
<td>50</td>
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<tr>
<td>7400A</td>
<td>Quadruple Lumen Peripheral Extension Set with 2 Bonded Long Lines x 15cm and 1 Gravity fed line</td>
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<tr>
<td>7300A</td>
<td>Triple Lumen Peripheral Extension Set with 2 Bonded Long Lines x 15cm and 1 Gravity fed line</td>
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<tr>
<td>7200A</td>
<td>Double Lumen Peripheral Extension Set x 15cm and 1 Gravity fed line</td>
<td>50</td>
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<td></td>
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</tr>
</tbody>
</table>
Benefits to Anaesthetic Team

- Keep medications near IV port
- Ergonomical work space
- Makes wiping IV port easy
- Extra set of hands when help not around
- Helps make RSI safe
- Creates valuable space for non-OR anaesthesia

Anestand can help health systems streamlines workflow, lower costs and improve compliance. All at the same time.