





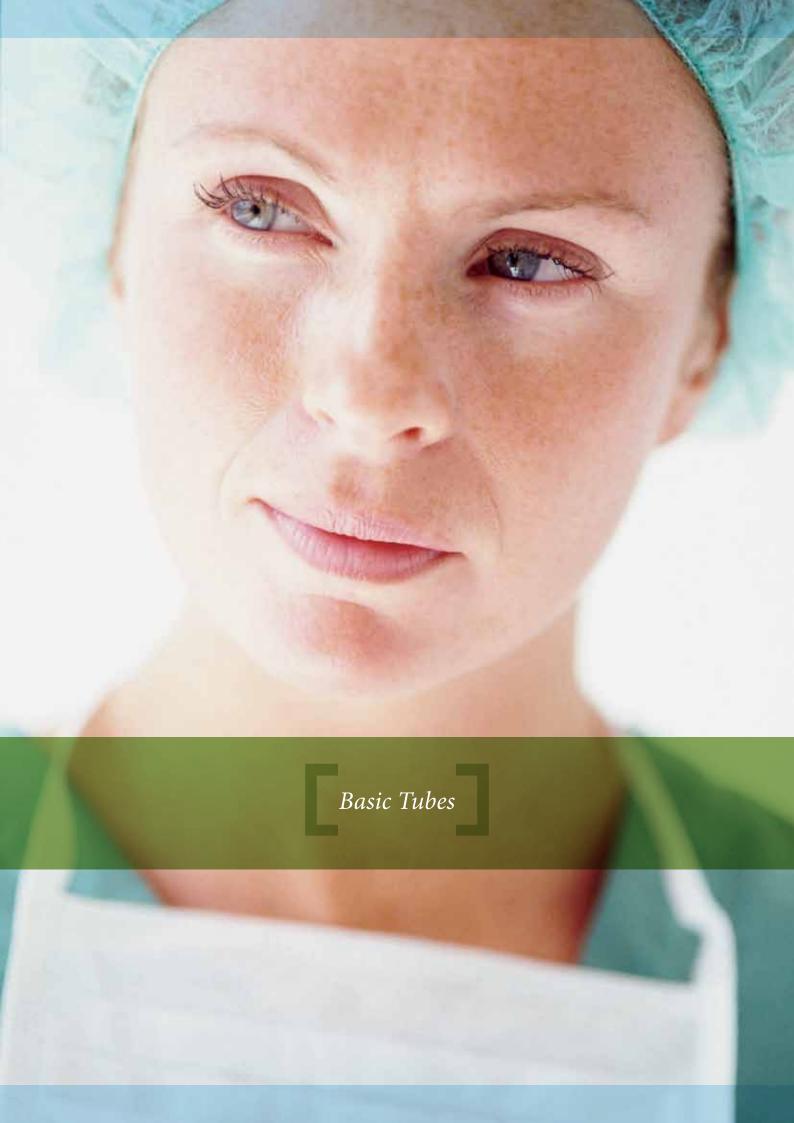
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## Mallinckrodt™ Tracheal Tube Quick Reference Guide

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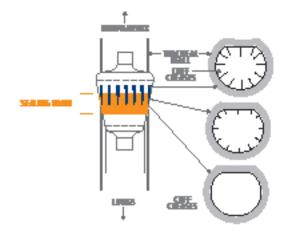


## TaperGuard™ Tracheal Tube concept

TaperGuard™ endotracheal tubes feature a unique, taper-shaped cuff. This technology offers significantly improved fluid sealing performance compared to the Mallinckrodt™ Hi-Lo cuff.¹

The taper-shaped cuff is designed with a diameter that is larger than the average adult trachea, gradually tapering to a smaller diameter at the distal end. This unique tapered shape allows the cuff to match the diameter of the trachea at some point along the cuff.<sup>1</sup>

By reducing the risk of perioperative aspiration, the TaperGuard™ product family potentially may reduce the risk of complications related to aspiration. Reducing complications related to aspiration may reduce PACU (recovery room) length of stay, ICU admissions, medication requirements and postoperative morbidity.<sup>2,3</sup>





<sup>1</sup> Internal Testing; Boulder 2/09

<sup>2</sup> Smetana G, et al. Preoperative pulmonary risk stratification for noncardiothoracic surgery: Systematic review for the American College of Physicians. Annals of Internal Medicine. 2006; 144(8): 581-595.

<sup>3</sup> Kluger MT, et al. Crisis management during anaesthesia: Regurgitation, vomiting and aspiration. Qual Saf Health Care. 2005; 14: 1-5

#### **TaperGuard™ Oral/Nasal Tracheal Tube**

#### **FEATURES AND BENEFITS:**

- Taper-shaped cuff reduces passage of secretions.
- Depth marks above the cuff to assist safe tube positioning.
- Hooded Murphy tip with eye as an additional safety feature.
- Suitable for oral and nasal intubation.
- Tip-to-tip x-ray line allows for safe positioning control.
- Also available with pre-loaded intubation stylet.



#### **ORDERING INFORMATION:**

REF	REF with stylet	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
10750		` ′	` ′	` ′	· · ·
18750	18750S	5.0	6.9	274	17.4
18755	187555	5.5	7.5	304	17.4
18760	18760S	6.0	8.2	317	20.6
18765	18765S	6.5	8.9	327	20.6
18770	18770S	7.0	9.5	339	25.4
18775	18775S	7.5	10.2	350	25.4
18780	18780S	8.0	10.8	360	25.4
18785	187855	8.5	11.4	370	28.6
18790	18790S	9.0	12.1	375	28.6
18795		9.5	12.8	375	28.6
18710	18710S	10.0	13.5	375	28.6

Carton Quantity: 10

## BRANDT™ System

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

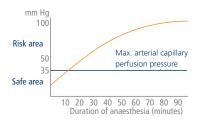


Extensive clinical studies have shown that during general anaesthesia, nitrous oxide diffuses into any air-filled tracheal tube cuff. This diffusion can cause a significant increase in cuff to tracheal wall pressure in as little as 15 minutes, which could result in damage to the delicate tracheal epithelium,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

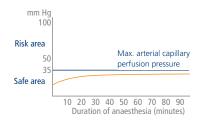
#### **FEATURES AND BENEFITS:**

- The BRANDT<sup>™</sup> system (pilot balloon) allows re-diffusion of nitrous oxide, which helps to maintain a low pressure cuff seal of the tracheal tube.
- The BRANDT<sup>™</sup> system is available with the Hi-Contour, RAE and reinforced tracheal tubes.

For further explanation please contact your Covidien representative.



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



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

#### Reference:

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

#### Hi-Contour Oral/Nasal Tracheal Tube Cuffed

#### **FEATURES AND BENEFITS:**

- Hi-Contour high volume, low pressure cuff helps to ensure an efficient low pressure cuff seal.
- Thin-walled and flexible cuff to assist intubation and reduce the risk of tracheal damage.
- Depth marks above the cuff enable safe tube positioning.
- Tip-to-tip x-ray line allows for safe positioning control.
- Murphy eye incorporated as an additional safety feature.
- Suitable for both oral and nasal intubation.

Also available with the BRANDT $^{\text{\tiny TM}}$  system, a valve which allows rediffusion of nitrous oxide and maintains a low pressure cuff seal. For a detailed description, please refer to the page "BRANDT $^{\text{\tiny TM}}$  system".



#### **ORDERING INFORMATION:**

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

Carton Quantity: 10



#### **Oral/Nasal Tracheal Tube Cuffed/Cuffless**

Standard basic tubes

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

#### **FEATURES AND BENEFITS:**

- Cuffed tracheal tube with Luer valve and pilot balloon.
- Intubation depth marks and pre-mounted 15 mm connector.
- Tip-to-tip x-ray line allows for safe positioning control.
- Murphy eye incorporated as an additional safety feature.

#### **ORDERING INFORMATION:**

REF	Description	I.D.	0.D.	Length	Cuff Ø	i
		(mm)	(mm)	(mm)	(mm)	
cuffless						
9320E	2.0mm Endotracheal Tube UNCUF	2.0	2.9	130	-	
9325E	2.5mm Endotracheal Tube UNCUF	2.5	3.6	140	-	
9336E	3.0mm Endotracheal Tube UNCUF	3.0	4.2	160	-	<b>₩</b>
9335E	3.5mm Endotracheal Tube UNCUF	3.5	4.9	180	-	AT
9342E	4.0mm Endotracheal Tube UNCUF	4.0	5.5	200	-	
9345E	4.5mm Endotracheal Tube UNCUF	4.5	6.2	220	-	PAEDIATRI
9350E	5.0mm Endotracheal Tube UNCUF	5.0	6.8	240	-	
9360E	5.5mm Endotracheal Tube UNCUF	5.5	7.5	270	-	
9366E	6.0mm Endotracheal Tube UNCUF	6.0	8.2	280	-	
9365E	6.5mm Endotracheal Tube UNCUF	6.5	8.8	290	-	
9370E	7.0mm Endotracheal Tube UNCUF	7.0	9.6	310	-	
cuffed						
9430E	3.0mm Endotracheal Tube CUFD	3.0	4.2	160	8	2
9440E	4.0mm Endotracheal Tube CUFD	4.0	5.5	200	11	PAEDIATRIC
9450E	5.0mm Endotracheal Tube CUFD	5.0	6.8	240	16	E E
9555E	5.5mm Endotracheal Tube CUFD	5.5	7.5	270	17	<b>₹</b>
9460E	6.0mm Endotracheal Tube CUFD	6.0	8.2	280	22	
9465E	6.5mm Endotracheal Tube CUFD	6.5	8.8	290	22	
9570E	7.0mm Endotracheal Tube CUFD	7.0	9.6	310	25	
9475E	7.5mm Endotracheal Tube CUFD	7.5	10.2	320	25	
9480E	8.0mm Endotracheal Tube CUFD	8.0	10.9	320	27	
9485E	8.5mm Endotracheal Tube CUFD	8.5	11.5	320	27	
9590E	9.0mm Endotracheal Tube CUFD	9.0	12.1	320	29	
9495E	9.5mm Endotracheal Tube CUFD	9.5	12.8	320	29	
9500E	10.0mm Endotracheal Tube CUFD	10.0	13.5	320	32	
Longth avel 1E n	· · · · · · · · · · · · · · · · · · ·					

Length excl. 15 mm connector

Carton Quantity: 10



#### **Oral/Nasal Tracheal Tube Cuffless**

#### **FEATURES AND BENEFITS:**

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



REF	I.D.	O.D.	Length incl.	
	(mm)	(mm)	Connector (	mm)
111-20	2.0	2.9	171	
111-25	2.5	3.6	171	
111-30	3.0	4.3	190	$\frac{1}{2}$
111-35	3.5	4.9	213	F
111-40	4.0	5.6	232	
111-45	4.5	6.2	253	PAEDIATRIC
111-50	5.0	6.9	274	
111-55	5.5	7.5	304	
111-60	6.0	8.2	317	
111-65	6.5	8.8	327	
111-70	7.0	9.6	339	

Carton Quantity: 10



#### **Contour Oral/Nasal Tracheal Tube Cuffless**

#### **FEATURES AND BENEFITS:**

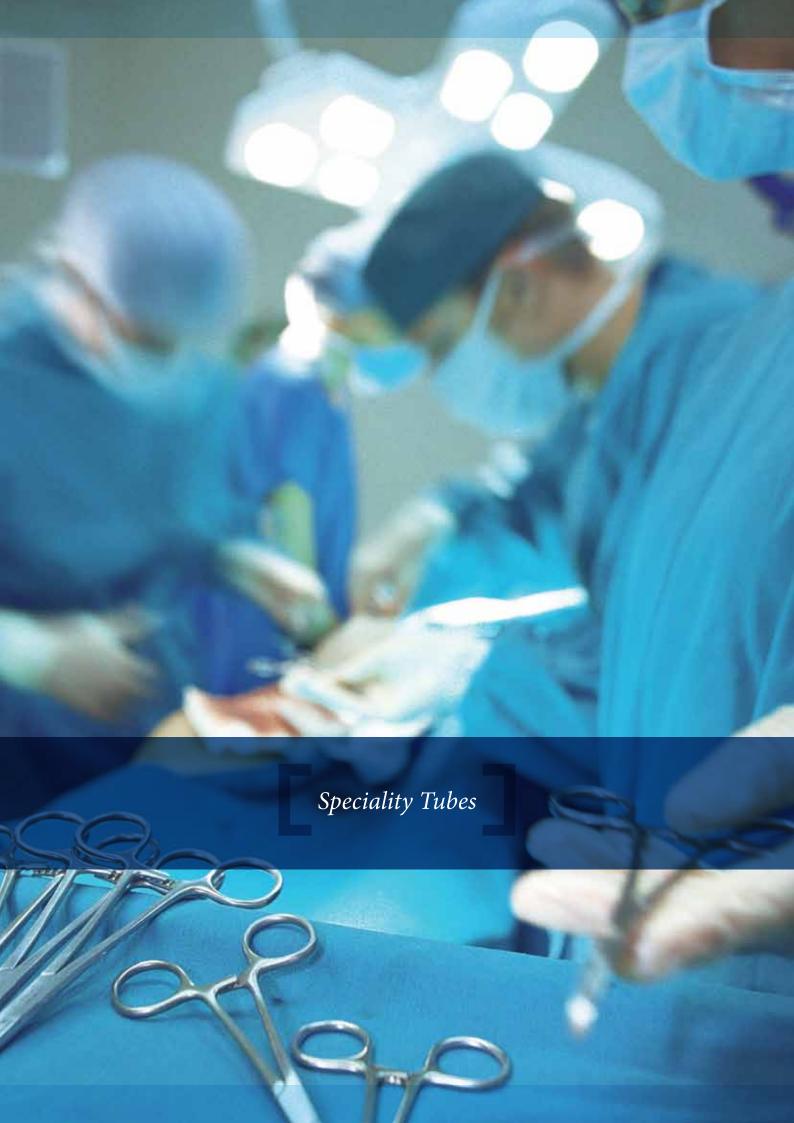
- Specially formulated softer material is particularly suitable for nasal intubation.
- Semi-transparent tubes allow direct visualisation of condensation of exhaled air.
- Specially moulded hooded tip assists nasal intubation and provides highest patient safety and comfort.
- Graduation marks on both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

#### **ORDERING INFORMATION:**

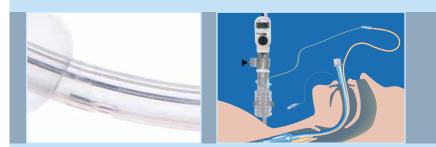
REF	I.D. (mm)	0.D. (mm)	Length (mm)	
411-25	2.5	3.6	171	
411-30	3.0	4.3	190	<u>U</u>
411-35	3.5	5.1	213	4
411-40	4.0	6.0	232	ĕ
411-45	4.5	6.5	253	PAEDIATRIC
411-50	5.0	6.9	274	₽
411-55	5.5	7.5	304	
411-60	6.0	8.2	317	
411-65	6.5	8.8	327	
411-70	7.0	9.6	339	

Carton Quantity: 10





## Evac concept



One of the major causes of bronchopulmonary infections in patients undergoing long-term ventilation is aspiration from the subglottic space. Drainage of the subglottic space can significantly reduce the risk of infection in the airway during prolonged intubation. Several scientific studies have demonstrated that regular drainage of the subglottic space using the subglottic drainage system can significantly reduce the incidence of nosocomial pneumonia in the ICU during prolonged intubation<sup>1</sup>.

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

<sup>1</sup> Smulders K, Van der Hoeven H, Weers-Pothoff I, Vandenbroucke-Grauls, C. A randomized clinical trial of intermittent subglottic secretion drainage in patients receiving mechanical ventilation. CHEST 2002; 121: 858-862

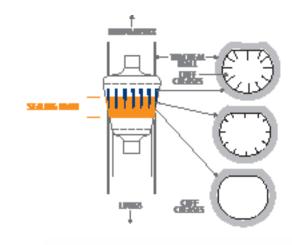
#### **TaperGuard™ Evac Oral Tracheal Tube**

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



#### **FEATURES AND BENEFITS:**

- Taper-shaped cuff reduces passage of secretions.
- The cuff is designed with a proximal end diameter larger than the average adult trachea and a smaller diameter at the distal end.
- Reduces microaspiration by an average of 90% compared to the Mallinckrodt™ Hi-Lo barrelshaped cuff.¹
- Depth marks above the cuff to assist safe tube positioning.
- Markings at the dorsal opening allow for checking of the cuff position.
- Hooded Murphy tip with eye as an additional safety feature.
- Tip-to-tip x-ray line allows for safe positioning control.
- Suitable for oral intubation.





#### **ORDERING INFORMATION:**

REF	I.D. (mm)	O.D. (mm)	Length (mm)	Cuff Ø (mm)
Oral	()	()	()	\ <i>,</i>
18860	6.0	9	308	20.6
18865	6.5	9.8	317	20.6
18870	7.0	10.4	330	25.4
18875	7.5	11.2	350	25.4
18880	8.0	11.8	360	25.4
18885	8.5	12.6	370	28.6
18890	9.0	13.1	375	28.6

Carton Quantity: 10

#### **Oral/Nasal Tracheal Tube Cuffed, Reinforced**

#### **FEATURES AND BENEFITS:**

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

A bite block or guedel airway is recommended when using reinforced tracheal tubes.

Reinforced tracheal tube is also available with the BRANDT™ system.



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







#### Oral/Nasal Tracheal Tube Cuffless, Reinforced, Extra Soft

#### **FEATURES AND BENEFITS:**

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



REF	I.D. (mm)	O.D. (mm)	Length (mm)	
127-25	2.5	4.0	159	
127-30	3.0	4.7	179	<u>ပ</u>
127-35	3.5	5.3	202	~
127-40	4.0	6.0	222	ĕ
127-45	4.5	6.7	242	PAEDIATRIC
127-50	5.0	7.3	262	Z
127-55	5.5	8.0	294	

Carton Quantity: 10



#### **Oral/Nasal Tracheal Tube Cuffless, Reinforced**

#### **FEATURES AND BENEFITS:**

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



#### **ORDERING INFORMATION:**

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

Carton Quantity: 10

#### **Oral and Nasal RAE Tracheal Tube Cuffed**

Preformed tracheal tube

#### **FEATURES AND BENEFITS:**

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

RAE tubes are also available with the BRANDT $^{**}$  System.

RAE - developed by Drs Ring, Adair and Elwyn





REF	REF	I.D.	O.D.	Length	Cuff Ø	
	with BRANDT	(mm)	(mm)	(mm)	(mm)	
Oral						
115-40	315-40	4.0	5.6	216	8	2
115-45	315-45	4.5	6.2	237	11	ATR
115-50	315-50	5.0	6.9	251	19	PAEDIATRIC
115-55	315-55	5.5	7.6	263	21	₹
115-60	315-60	6.0	8.2	287	22	
115-65	315-65	6.5	8.7	297	24	
115-70	315-70	7.0	9.5	317	28	
115-75	315-75	7.5	10.1	327	30	
115-80	315-80	8.0	10.8	345	31	
115-85	315-85	8.5	11.1	355	33	
115-90	315-90	9.0	11.9	374	34	
Nasal						
119-60	319-60	6.0	8.2	386	22	
119-65	319-65	6.5	8.7	396	24	
119-70	319-70	7.0	9.5	406	28	
119-75	319-75	7.5	10.1	416	30	
119-80	319-80	8.0	10.8	425	31	

Carton Quantity: 10



#### **Oral and Nasal RAE Tracheal Tube Cuffless**

**Preformed Tracheal Tubes** 

#### **FEATURES AND BENEFITS:**

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

#### **ORDERING INFORMATION:**

REF	I.D.	O.D.	Length	
Oral	(mm)	(mm)	(mm)	
113-30	3.0	4.2	174	
113-35	3.5	4.8	195	M M
113-40	4.0	5.6	210	A
113-45	4.5	6.2	232	
113-50	5.0	6.9	246	PAEDIATRIC
113-55	5.5	7.6	263	4
113-60	6.0	8.2	273	
113-65	6.5	8.7	285	
113-70	7.0	9.5	300	

Carton Quantity: 10

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

REF Nasal	I.D. (mm)	O.D. (mm)	Length (mm)	
114-30	3.0	4.2	190	
114-35	3.5	4.8	220	
114-40	4.0	5.6	240	1
114-45	4.5	6.2	272	5
114-50	5.0	6.9	220 240 272 286	ŧ
114-55	5.5	7.6	293	
114-60	6.0	8.2	303	
114-65	6.5	8.7	310	
114-70	7.0	9.5	315	

Carton Quantity: 10





#### Nasal RAE Tracheal Tube Cuffed, Soft Finish

Preformed Tracheal Tube

#### **FEATURES AND BENEFITS:**

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



#### **ORDERING INFORMATION:**

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

Carton Quantity: 10

#### Microlaryngeal Oral/Nasal Tracheal Tube Cuffed

Tracheal tube for microlaryngeal surgery

#### **FEATURES AND BENEFITS:**

- Small diameter tube provides maximum access to the operative field.
- Length and cuff diameter comparable to a standard tube with 8 mm internal diameter.
- Special high volume, low pressure cuff to give maximum tracheal wall protection.
- Murphy eye incorporated as an additional safety feature.
- Suitable for both oral and nasal intubation.
- Tip-to-tip x-ray line allows for safe positioning control.
- •The microlaryngeal tracheal tube is not suitable for laser surgery.

#### **ORDERING INFORMATION:**

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

Carton Quantity: 10



#### **Laryngectomy Tracheal Tube Cuffed**

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

#### **FEATURES AND BENEFITS:**

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





#### **ORDERING INFORMATION:**

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

Carton Quantity: 10

#### **Laser Oral Tracheal Tube Dual Cuffed**

Stainless steel dual cuffed tube for ventilation during  ${\rm CO_2}$  and KTP laser surgery of the laryngeal / tracheal area

#### **FEATURES AND BENEFITS:**

- Laser-resistant, non-flammable, flexible stainless steel tube.
- Accidental contact of the tube shaft with the laser beam results in the reflection of a defocused beam.
- Airtight steel spiral prevents air leaks occuring along the tube's length.
- 15 mm connector bonded to the tracheal tube to reduce the risk of accidental disconnection of the tube.
- Dual cuffs of extra large diameter and individual inflation lines for maximum safety.
- The pilot balloons with self-sealing valves are clearly marked "proximal" and "distal".
- Murphy eye incorporated in a soft atraumatic tip as an additional safety feature.

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

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

Carton Quantity: 1



#### **Laser Oral Tracheal Tube Cuffless**

Stainless steel uncuffed tube for ventilation during  ${\rm CO_2}$  and KTP laser surgery of the laryngeal / tracheal area

#### **FEATURES AND BENEFITS:**

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

#### **ORDERING INFORMATION:**

REF	I.D. (mm)	O.D. (mm)	Length (mm)	
161-30	3.0	5.2	238	
161-35	3.5	5.7	238	品
161-40	4.0	6.1	238	4

Carton Quantity: 1



#### **Stronger PU Tracheal Cuff**

#### **Endobronchial Tube Left with Polyurethane Cuff**

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

#### **FEATURES AND BENEFITS:**

- The polyurethane tracheal cuff material shows a much higher puncture strengths than conventional materials <sup>1</sup>.
- The special design of the bronchial cuff assists in location of the distal tip when verification is confirmed by the fibre-optic bronchoscope.
- The blue-coloured bronchial cuff assists in identification of the distal tip when verifying correct placement by a fibre-optic bronchoscope.
- Slightly curved bronchial tube tip helps to improve placement in the left main bronchus.
- X-ray opaque markers at the distal tip, above the bronchial cuff and at the tracheal opening aid location and verification of the tube position.
- The accessory pack contains 2 Opti-Port<sup>™</sup> connectors, 2 Gentle-Flo<sup>™</sup> endobronchial suction catheters and 1 "Y" connector.
- Also available with x-ray opaque carinal hook for precise location of the endobronchial tube within the carina.



1 Internal bench testing

#### **ORDERING INFORMATION:**

REF standard	REF with CPAP system	REF with carinal hook	REF Pack w. 5 wo. accessories	I.D. mm *1	O.D. mm	O.D. Fr	Length mm
Left							
125028	125128	-	125528	3.1	9.3	28	420
125032	125132	-	125532	3.4	10.7	32	420
125035	125135	125235	125535	4.8	11.7	35	420
125037	125137	125237	125537	5.1	12.3	37	420
125039	125139	125239	125539	5.3	13.0	39	420
125041	125141	125241	125541	5.4	13.7	41	420

Accessories: Contains REF 125-10 and 2 extra long Gentle-Flo™ Suction Catheters

<sup>\*1</sup> Applicable limit when using a fibre-optic bronchoscope

#### **Endobronchial Tube Right with Polyurethane Cuff**

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

**Stronger PU Tracheal Cuff** 

#### **FEATURES AND BENEFITS:**

- The polyurethane tracheal cuff material shows a much higher puncture strengths than conventional materials <sup>1</sup>.
- Blue colour-coded bronchial cuff, bronchial proximal lumen and bronchial pilot balloon for easy identification.
- Special "S" shaped bronchial cuff provides an increased margin of safety when positioning the endobronchial tube in the proximity of the right upper lobe.
- The blue-coloured bronchial cuff assists in identification of the distal tip when verifying correct placement by a fibre-optic bronchoscope.
- X-ray opaque markers at the distal tip, around the side eye, above the bronchial cuff and at the tracheal opening aid location and verification of the tube position.
- The accessory pack contains 2 Opti-Port<sup>™</sup> connectors,
   2 Gentle-Flo<sup>™</sup> endobronchial suction catheters and 1 "Y" connector.



1 Internal bench testing

#### **ORDERING INFORMATION:**

REF standard	REF with CPAP system	REF with carinal hook	REF Pack w. 5 wo. accessories	I.D. mm *1	O.D. mm	O.D. Fr	Length mm
Right							
126035	126135	-	126535	4.8	11.7	35	420
126037	126137	-	126537	5.1	12.3	37	420
126039	126139	-	126539	5.3	13.0	39	420
126041	126141	-	126541	5.4	3.7	41	420

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

<sup>\*1</sup> Applicable limit when using a fibre-optic bronchoscope

#### **Accessory Pack for Endobronchial Tubes**

#### **FEATURES AND BENEFITS:**

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

#### **Accessory Pack:**

Content: 2 Opti-Port™ connectors, 1 Y- connector The accessory pack is included in the single packs of all endobronchial tubes

#### **ORDERING INFORMATION:**

REF	Description	Carton / Quantity
125-10	Accessory pack	10

#### **CPAP<sup>1</sup> System**

To avoid or treat hypoxaemia during one-lung anaesthesia.

#### **FEATURES AND BENEFITS:**

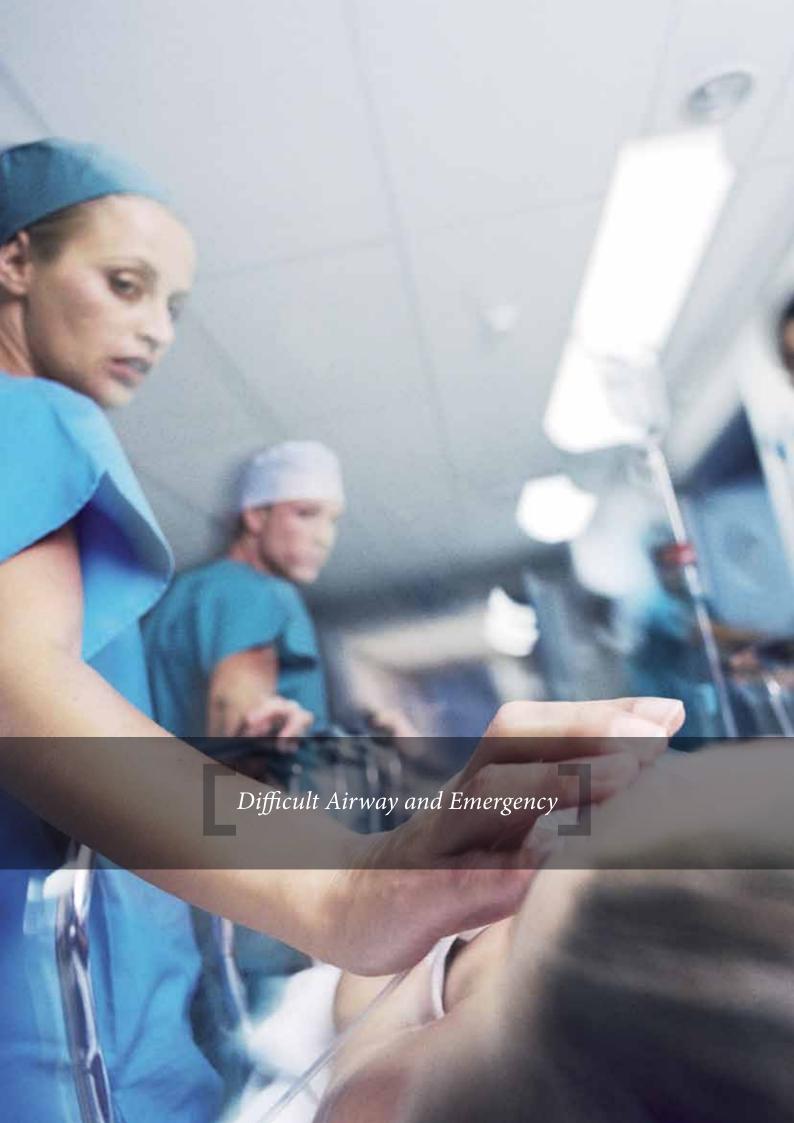
- Patented CPAP valve allows exact adjustment of pressure levels from 1 to 10 cm H<sub>2</sub>O.
- Breathing bag aids opening of the alveoli.
- Right-angled double swivel connector allows easy attachment to the endobronchial tube.
- Kink resistant oxygen tubing reduces the risk of occlusion.
- The lightweight system reduces unnecessary force on the proximal end of the endobronchial tube, minimising the risk of disconnection.
- Compact and easy to use, even when space is confined.
- Latex-free.

#### **ORDERING INFORMATION:**

REF	Carton / Quantity
125-20	5



<sup>&</sup>lt;sup>1</sup> The CPAP valve is licensed from Dr. David Alfery.



#### **Esophageal Tracheal Airway Double Lumen**

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

#### **FEATURES AND BENEFITS:**

- Special double-lumen design allows for rapid establishment of an effective airway through either esophageal or tracheal placement.
- Blind placement reduces the need for a laryngoscope.
- Pharyngeal balloon inflates to hold device firmly in place and helps prevent the escape of gas through the nose or mouth.
- Full-length lumen allows for suctioning of gastric contents with no interruption of patient ventilation should the esophageal tracheal airway be placed in the esophagus.
- Esophageal cuff inflates to seal the esophagus so that gas does not enter the stomach and gastric contents are not aspirated.
- Appropriate for pre-hospital, surgical and emergency use.
- Tip-to-tip x-ray line allows for safe positioning control.
- Esophageal/Tracheal double-lumen airway
  Use size 37 for patients 122cm (4') to 183 cm (5'6") tall
  Use size 41 for patients 152 cm (5') tall and above

#### **ORDERING INFORMATION:**

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



#### **Oxford Oral Tracheal Tube Cuffed**

Preformed tracheal tube

#### **FEATURES AND BENEFITS:**

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



#### **ORDERING INFORMATION:**

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

Carton Quantity: 10



#### **Guedel Airway**

Sterile & ready for use

#### **FEATURES AND BENEFITS:**

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

#### **Guedel Airway**

Reusable

#### **FEATURES AND BENEFITS:**

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



#### **ORDERING INFORMATION:**

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

<sup>\* \*</sup> Axial measurement from the underside of proximal end to the centre of the distal opening

Carton Quantity: 10 single packed, ready for use

#### **ORDERING INFORMATION:**

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

<sup>\*</sup> Axial measurement from the underside of proximal end to the centre of the distal opening

Carton Quantity: 10

single packed, ready for use

#### **Guedel Airway**

Sterile, ready for use without colour-coding

#### **FEATURES AND BENEFITS:**

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

#### **ORDERING INFORMATION:**

REF	Size	Length (mm)*
287/25018	6	110
287/25017	5	100
287/25016	4	90
287/25015	3	80
287/25014	2	70
287/25013	1	60
287/25012	0	50
287/25011	00	40
287/25010	000	30

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

Carton Quantity: 10 single packed, ready for use

#### **Nasopharyngeal Airway**

#### **FEATURES AND BENEFITS:**

- Soft material.
- · Anatomically designed.
- Glide-Tex<sup>™\*</sup> serrations inside airway.
- Slide-Tex<sup>™\*</sup> exterior finish.
- Thin-wall construction.
- Sterile.

#### **ORDERING INFORMATION:**

REF	I.D.	0.D.		Length
	(mm)	(Fr)	(mm)	(mm)
8888247023	6.5	26	8.7	114
8888247031	7.0	28	9.3	127
8888247049	7.5	30	10.0	140
8888247056	8.0	32	10.7	152
8888247064	8.5	34	11.3	159

Carton Quantity: 10 sterile, single packed

#### **Intubating Stylet**

#### **FEATURES AND BENEFITS:**

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

#### **ORDERING INFORMATION:**

REF SATIN SLIP	Recommended tube I.D. (mm)	Length (mm)		
Intubating stylet	clean packed			
116-06	2.5 to 4.5	280		
116-10	4.0 to 6.0	350	ͳ	
116-14	> 5.0	350		
Intubating stylet sterile, single packed				
116-06-S	2.5 to 4.5	280		
116-10-S	4.0 to 6.0	350	프	
116-14-S	> 5.0	350		

Carton Quantity: 10

#### **Tracheal Tube Restraint**

#### **FEATURES AND BENEFITS:**

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

#### **ORDERING INFORMATION:**

REF tracheal tube restraint	Length (mm)
330	700

Carton Quantity: 25





#### **Double Swivel Connector**

**Right Angled Connector** 

#### **FEATURES AND BENEFITS:**

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



REF RADSC	Carton / Quantity			
104-13	10			
Sterile, single packed. Single use only				

#### **Hand Pressure Gauge**

#### **FEATURES AND BENEFITS:**

- Convenient, ergonomic design.
- Calibrated in cm H<sub>2</sub>O.
- Fitted with clip attachment for storage and quick access.
- Each unit is supplied with a detachable, long flexible connecting tube.
- An extension tube is also available, separately packed, ready for use.
- Build-in vacuum valve for easy evacuation of low pressure cuffs.

#### **ORDERING INFORMATION:**

REF	Description	Carton / Quantity
109-02	Hand pressure gauge	1
109-05	Connecting tube	10







#### **Cuff Pressure Gauge**

The new Mallinckrodt™ pressure control cuff pressure device was designed to reduce the need to manually check cuff pressure during anaesthesia and long term ventilation whenever a tracheal or tracheostomy tube is in place.

Consistent regulation may help minimise pressure-related tracheal injury and micro-aspiration.

#### **FEATURES AND BENEFITS:**

- Maintains constant cuff pressure by microprocessor control.
- Incremental pressure adjustment (max. value 99 cmH<sub>2</sub>O) allows use of the device even in difficult mechanical ventilation settings.
- Acoustic and visual alarm in case of pressure changes or disconnection provides continuous safety for patient and medical staff.
- Auto-set function inflates cuff to 25 cmH<sub>2</sub>O and minimises the risk of initial over-inflation of the cuff.
- Large LCD with continuous display of current cuff pressure.
- Battery back-up in case of power failure and during transportation makes it independent from power supply.
- Universal clamp for fixation to standard horizontal rail and pole mount.





#### **ORDERING INFORMATION:**

REF	Description	Carton/Quantity
109-03	Mallinckrodt <sup>™</sup> Pressure Control	1
109-05	Connecting Tube 100 cm	10
109-05M2	Connecting Tube 200 cm	10

#### **Secretion Remover**

Clogging remover for Tracheal Tubes and tracheostomy tubes

#### **FEATURES AND BENEFITS:**

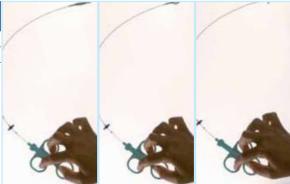
- Easy to use tool for removal of clogging and incrustations from inner lumen of tracheal tubes.
- Fast restoring of airway in case of obstruction with secretion which cannot be eliminated by regular suctioning.
- Avoids re-intubation and the related additional risks.
- Routinely used, it can prevent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

#### **ORDERING INFORMATION::**

REF	Describtion	Length of use	Carton/Quantity
111/1115	Secretion Remover for Endotracheal Tube	41 cm	5
111/1118	Secretion Remover for Tracheostomy Tube	24 cm	5

Delivered single and sterile packed. For single use only





#### **Colorimetric CO**<sub>2</sub> **Detectors** Adult and Paediatric CO<sub>2</sub> detectors

For years, hospital and emergency medical services clinicians have relied on colorimetric  $\mathrm{CO}_2$  detectors to verify proper endotracheal tube placement. These  $\mathrm{CO}_2$  detectors ensure that your patient is intubated properly right from the start – and remains that way during transport.

Adult and paediatric  $CO_2$  detectors give you an easy, economical way to assess exhaled  $CO_2$  during airway management. Whether you're intubating patients in the ER, the ICU or the field, choose reliable technology from a name you trust.

#### **FEATURES AND BENEFITS:**

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

#### **ORDERING INFORMATION:**

REF	Description	Recommended patient size: Weight (kg)	Internal volume (cc)	Resistance to flow	Detector weight (g)	Connector ports  Patient end   Circuit end (mm) (mm)		Usage time (hours)
EASYCAP II PEDICAP	Case of 24	over 15	25	3.0 cm $H_2O \pm 1.0$ cm 60 L/min flow	Less than 20 g	22 OD/15 ID	15 OD/13 ID	Up to 2 hours
EASYCAP II 6 PEDICAP 6	Case of 6	1 to 15	3	$2.5 \text{ cm H}_2\text{O} \pm 0.5 \text{ cm}$ 10 L/min flow	Less than 5 g	18 OD/15 ID	15 OD/5 ID	Up to 2 hours



#### Mallinckrodt™ Evac System

Digital suction unit for intermittent and continuous suctioning for supraglottic drainage

For use on vacuum source

#### Intermittent suctioning - Regulator assembly

The set contains a full set, including the reusable digital pump 2 hydrophobic filters with adapters, 2 suction tubes 1.00 m and 10 reservoirs, for secretions collection.

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

Don't forget to reorder disposable component replacements after use.

#### **ASSEMBLING**



- 1 Fix the Mallinckrodt™ Evac suction system on pole mount or bed mount.
- Connect the hydrophobic filter PVC small adapter to the suction unit.
- Connect the hydrophobic filter PVC large adapter to the disposable reservoir.
- 4 Place the disposable reservoir on bracket fitting.
- to the disposable reservoir and attach to Evac tube suction lumen. To allow suctioning, get a proper tubing and a suitable fitting for the connection of the suction system (back part) to the vacuum source (tubing and fitting are not included in the package).

#### **ORDERING INFORMATION:**

REF	Description	Carton/Quantity
403P10190	Evac System - Digital Suction Unit	1
403P10189	Evac System Reservoir 0.3 l	10
403/10180	Suction Tubing 1.00 m	10
403/10185	Suction Tubing 1.50 m	10
403P10191	Electrostatic Filter for Evac System	10

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**IMPORTANT**: Please refer to the package insert for complete instructions, contraindications, warnings and precautions.

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