

PROTECT THE PATIENT. PROTECT THE AIRWAY.

Mallinckrodt™ Endotracheal Tube with Stylet and TaperGuard™ Cuff Technology

“Cleanliness and prevention of contamination from patient to patient is essential and consistent with patient safety.”¹

— Committee on Quality Management and Departmental Administration. Approved by ASA House of Delegates. 2010.

THE PROBLEM

In a code situation or prehospital setting, and even in the OR, seconds count. To save time, clinicians often use prepared endotracheal tubes (ETTs) — where the ETT is removed from the sterile pack, preloaded with stylet and replaced in the original pack.

But with heightened focus on patient safety, clinicians must find a solution for both preparedness and compliance with regulatory standards and clinical guidelines, such as those issued by the ASA.¹

THE SOLUTION

Two products, one pack: Mallinckrodt™ TaperGuard™ endotracheal tube with stylet in one efficient, sterile package

The TaperGuard™ endotracheal tube with stylet is assembled and ready for use in one sterile pouch, so clinicians can always be ready to intubate at a moment's notice.



Medtronic
Further, Together

BEST PRACTICES

While it is acceptable to remove endotracheal tubes from sterile packaging, test and preload for later use, ASA guidelines state that prepared ETTs be used within 48 hours. Regulatory agencies may require hospitals to document when the ETT package was opened by writing on the packaging or applying a sticker with the time and date, another to-do for an already multitasking clinical staff. Also, any prepared tubes not used within 48 hours must be tossed, which is money down the drain — a waste of inventory and yet more medical waste.

Our solution: only open what you need, when you need it. With a prepared endotracheal tube with stylet and TaperGuard™ cuff, clinicians have the tools they need in one sterile, easy-to-access pack — no preloading necessary.

SAFETY AND CLINICAL VALUE

Preloaded, sterile, ready for use

In one sterile pack, you get the clinical benefits of TaperGuard™ cuff technology and ready access to a stylet, which can be critical to facilitating intubation in emergency situations, in certain procedures and for patients with challenging airways.

TaperGuard™ cuff technology reduces risk of microaspiration

The Mallinckrodt™ endotracheal tube with TaperGuard™ technology features a unique, taper-shaped cuff that provides 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.²

By reducing the risk of perioperative aspiration, the endotracheal tube with TaperGuard™ cuff may potentially 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.^{3, 4}

LESS WASTE

The impact on the landfill and cost to dispose of medical waste are steep, so minimizing waste is imperative, both for the environment and the hospital budget.

Two products, one pack: an endotracheal tube with stylet in one portable, sterile package reduces packaging and shipping material that would otherwise end up as medical waste, helping the hospital meet green initiatives and decrease disposal costs.

After opening the endotracheal tube with stylet for use, one pouch — not two — gets tossed in the trash. Two products in one sterile pack also prevents the potential waste of unused prepared endotracheal tubes, which according to ASA guidelines must be used within 48 hours of opening.

Mallinckrodt™ Endotracheal Tube with Stylet and TaperGuard™ Cuff

SKU NO.	DESCRIPTION	SIZE	QTY
18750S	TaperGuard™ Tube with Stylet	5.0 mm	Box 10
18755S	TaperGuard™ Tube with Stylet	5.5 mm	Box 10
18760S	TaperGuard™ Tube with Stylet	6.0 mm	Box 10
18765S	TaperGuard™ Tube with Stylet	6.5 mm	Box 10
18770S	TaperGuard™ Tube with Stylet	7.0 mm	Box 10
18775S	TaperGuard™ Tube with Stylet	7.5 mm	Box 10
18780S	TaperGuard™ Tube with Stylet	8.0 mm	Box 10
18785S	TaperGuard™ Tube with Stylet	8.5 mm	Box 10
18790S	TaperGuard™ Tube with Stylet	9.0 mm	Box 10
18710S	TaperGuard™ Tube with Stylet	10.0 mm	Box 10

1. Statement on standard practice for infection prevention and control instruments for tracheal intubation. Approved by ASA House of Delegates, October 20, 2010. Available at: <http://www.asahq.org/~media/sites/asahq/files/public/resources/standards-guidelines/statement-on-standard-practice-for-infection-prevention-for-tracheal-intubation.pdf>.

2. Based on internal testing; 2009.

3. Smetana GW, Lawrence VA, Cornell JE; American College of Physicians. Preoperative pulmonary risk stratification for noncardiothoracic surgery: systematic review for the American College of Physicians. *Ann Intern Med.* 2006;144(8):581-595.

4. Kluger MT, Visvanathan T, Myburgh JA, Westhorpe RN. Crisis management during anaesthesia: regurgitation, vomiting, and aspiration. *Qual Saf Health Care.* 2005;14(3):e4.

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05/2016-11-AW-0245(2)-[WF# 61148]