Precise ETT airway monitoring didn't exist – until now.

SonarMed™ airway monitoring system

The SonarMed™ airway monitoring system may help improve a clinician's ability to manage a patient's airway – offering clinicians confidence in having immediate feedback to potential airway concerns – by assisting in providing precise, continuous, real-time monitoring of endotracheal tube (ETT) position and patency†.

During an intubation, the SonarMed™ airway monitoring system helps:

Optimize suctioning practice
by identifying the location and extent of obstructions within the ETT

Monitor ETT movement toward a smaller or larger passageway
by measuring the circumference of the patient's trachea at the tip of the ETT

Reduce unplanned extubations
by measuring the location and movement of the ETT tip within the trachea

In the NICU, unplanned extubations (UEs) are the most common adverse event during mechanical ventilation.[1] UEs can significantly impact patient safety. Interrupting the ventilation of a neonate could lead to respiratory deterioration and hypoxia, and could trigger a cascade of potentially life-threatening physiological stressors.

Yet, some of the recommended interventions can add more stress to the intubated baby and can impact neonatal well-being.

What if you could:

- See real-time movement of ETTs?
- Be alerted when an obstruction occurs?
- Get immediate feedback on ETT placement?

With the SonarMed™ airway monitoring system, clinicians can see real-time movement of ETTs and identify obstructions – without touching the patient.

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Technology overview

The SonarMed™ airway monitoring system uses acoustic reflectometry to emit sound waves through the ETT and measures them as they return to the sensor.

The system analyzes the timing and amplitude of the echoes to estimate the position and integrity of the ETT. Immediate audible alerts then inform clinicians when movement or obstructions are detected.

The easy-to-read screen displays status changes of the ETT and monitors the correction of the tube location to the optimal baseline position.

The system connects to the ETT by replacing the 15 mm connector that attaches to the existing ventilator circuit.

Ordering information

ORDER CODE	DESCRIPTION	UNIT OF MEASURE	QTY
AW-M0001	SonarMed™ system monitor	Each	1
AW-S025	Neonatal SonarMed™ sensor (2.5 mm)	Box	5
AW-S030	Neonatal SonarMed™ sensor (3.0 mm)	Box	5
AW-S035	Neonatal SonarMed™ sensor (3.5 mm)	Box	5
AW-S040	Pediatric SonarMed™ sensor (4.0 mm)	Box	5
AW-S045	Pediatric SonarMed™ sensor (4.5 mm)	Box	5
AW-S050	Pediatric SonarMed™ sensor (5.0 mm)	Box	5
AW-MA002	SonarMed™ monitor mounting bracket	Each	1
AW-MA003	SonarMed™ system mounting pole threaded with IV hooks	Each	1

Note: All sensors come with a suctioning Y-connector.

SonarMed™ monitor

Suctioning Y-connector

SonarMed™ sensor

Monitor mounting bracket

Sensor cable

Power adapter

Power cable

1. Hatch LD, Scott TA, Slaughter JC, et al. Outcomes, resource use, and financial costs of unplanned extubations in preterm infants. Pediatrics. 2020;145(6):e20192819.
2. Cong X, Wu J, Vittner D, et al. The impact of cumulative pain/stress on neurobehavioral development of preterm infants in the NICU. Early Hum Dev. May 2017;108:9-16.

† The SonarMed™ airway monitoring system should not be used as the sole basis for diagnosis or therapy and is intended only as an adjunct in patient assessment.

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