

King Airway LT(S)-D

ALS BLS Protocol

- ABCs
- Oxygen 100%
- Assist Ventilations, prn
- Transport ASAP

Indications:

- Endotracheal intubation cannot be performed
- Attempts at endotracheal intubation have been unsuccessful

Contraindications:

- Responsive patients with an intact gag reflex
- Patients with known esophageal disease
- Patients who have ingested caustic substances

Preparation

Choose the correct size LT(S)-D:

<u>Patient Height</u>	<u>King LT-D</u>	<u>Inflation</u>	<u>King LTS-D</u>
35-45 inches	Size 2 (Green)	Inflation: 25-35ml	n/a
41-51 inches	Size 2.5 (Orange)	Inflation: 30-40ml	n/a
4-5 feet	Size 3 (Yellow)	Inflation: 45-60ml	Size 3 Inflation: 40-55ml
5-6 feet	Size 4 (Red)	Inflation: 60-80ml	Size 4 Inflation: 50-70ml
> 6 feet	Size 5 (Purple)	Inflation: 70-90ml	Size 5 Inflation: 60-80ml

Test cuff inflation system, remove air from cuff prior to insertion

Apply water-based lubricant to the beveled distal tip and posterior aspect of the tube

Technique

Hold the King LT(S)-D at the connector with dominant hand. With non-dominant hand, open mouth and apply chin lift, unless contraindicated by C-spine precautions or patient position. Using a lateral approach, introduce tip into corner of mouth

Advance the tip behind the base of tongue, while rotating tube back to midline so that the blue orientation line faces chin of patient

Without exerting excessive force, advance tube until base of connector is aligned with teeth or gums

Inflate cuff with appropriate volume of air as indicated by the color code on the syringe

Begin ventilation with 100% oxygen, while bagging patient to assess ventilation, withdraw the LT(S)-D until ventilation is easy and free flowing

If necessary, add additional volume to cuffs to maximize seal of the airway

Confirm proper placement by auscultation, chest movement, oxygen saturation, and verification of CO2 by capnography.

Assist Ventilations
Reassess Airway Frequently