

# Deluxe Difficult Airway Trainer

Directions for Use



**Laerdal**

*helping save lives*



## Table of Contents

Introduction.....	3
Items Included.....	3
Features and Skills.....	3
Cautions and Warnings.....	3
Laerdal Recommends .....	3
Preparation for Use.....	3
Trainer Assembly.....	4
Care and Maintenance .....	4
Replacement Parts.....	4
Specifications.....	4

## Introduction

The Deluxe Difficult Airway Trainer (261-10001) is a lifelike manikin torso which realistically simulates a patient. This model features a manually inflatable tongue to simulate an obstructed airway and is specifically designed for training professionals in the practice of difficult airway management.

## Items Included

- (1) Deluxe Difficult Airway Trainer
- (1) Airway Lubricant
- (6) Neck Skin
- (1) Cricothyroid Tape
- (1) Tank Top
- (1) Carry Case
- (1) Laerdal Global Warranty Booklet
- (1) Directions for Use

## Features and Skills:

### Airway Management

- Manually inflatable tongue to simulate obstructed airway
- Oral and nasal intubation
- Retrograde intubations
- Trans-tracheal jet ventilation
- Oral and nasal fiber optic intubation
- Surgical cricothyrotomy
- Needle cricothyrotomy
- Lightwand intubation
- Combitube
- Laryngeal Mask Airway (LMA) intubation
- Oropharyngeal and nasopharyngeal airway insertion
- Suctioning techniques
- Right mainstem intubation
- Bag/Valve Mask ventilation
- Stomach auscultation to verify proper positioning
- Abdominal thrust

### Cardiac Related

- Manual chest compressions
- Manually generated carotid pulse

## Cautions and Warnings

- This product contains Natural Rubber Latex which may cause allergic reactions with direct contact.
- The following techniques should not be performed on

this trainer due to the inability to properly sanitize the airway if they are performed:

- Mouth-to-mouth / Mouth-to-mask ventilation
  - Insertion of simulated vomit for suctioning
- Lubricate the oral and nasal airways liberally with the lubricant provided prior to inserting any instrument, tube or airway device into the airway. Additionally, instruments and tubes should also be lubricated prior to use.

## Laerdal Recommends

Endotracheal tube – Size 7.5  
 Straight or Curved Laryngoscope Blade – Size 3 or 4  
 LMA - Size 4  
 Combitube – Size Large

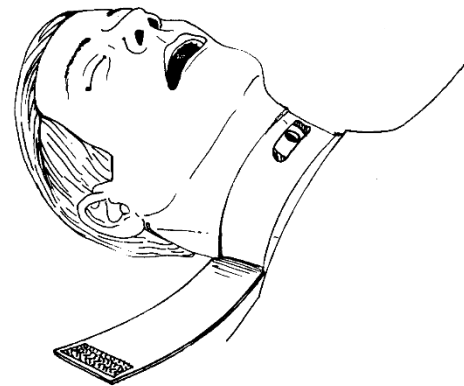
## Preparation for Use:

### Airway Management

1. Spray inside of pharynx, both nostrils and all intubation tubes with a liberal amount of provided manikin lubricant.
2. Perform intubation procedures as per your local protocol.

### Cricothyroid Membrane / Neck Skin Collar

1. Remove neck skin collar by detaching Velcro®.
2. Cut a 2 inch strip of Cricothyroid Membrane Tape.
3. Adhere tape to edges of cricoid opening, covering opening with tape, to create a simulated membrane.
4. Place Neck Skin Collar into molded track around neck area of trainer.
5. Attach collar using Velcro® strips.



### Note:

- A tight seal will enhance actual feel and sound of penetrating the cricothyroid membrane and facilitates full rise and fall of the chest during bag valve mask ventilation.
- The neck skin collar is designed to provide multiple sites for needle and surgical techniques. When a fresh site is needed, rotate the collar in either direction. If the neck skin collar is showing wear, discard and replace with a new collar.

### **Obstructed Airway (Manual Inflation of Tongue)**

1. Locate inflation bulb at lower left side of torso.
2. Tighten air release knob.
3. Pump bulb several times to inflate tongue to desired size. To deflate tongue, loosen air release knob.

#### **Note:**

- Do not store trainer with tongue inflated or leave tongue inflated for long periods of time.

### **Carotid Pulse**

To generate a carotid pulse, use hand held red bulb located on right axillary side of trainer. Firmly squeeze bulb when palpating for pulse at carotid site.

### **Trainer Assembly:**

#### **Head**

The head is connected to the torso by a long bolt at base of the neck, secured with a wing-nut. To remove the head, remove the chest skin and lift chest plate from the torso. Disconnect the carotid pulse and inflation bulbs from their tubing. Remove the wing nut and washer. The head will lift out of torso.

#### **Lungs**

Lungs may be removed from bronchial tubes by unscrewing them from the bronchial connectors. To replace, reverse the procedure.

#### **Abdominal Thrust**

To remove the abdominal thrust module, remove screws from each side of manikin. Module will slide out. To replace, reverse the procedure.

### **Care and Maintenance**

1. Clean with mild soap and water, do not submerge trainer or parts in cleaning fluids or water.
2. To ensure longevity, trainer should be cleaned after each training session and general inspection should be conducted regularly.
3. Store properly between training sessions.

### **Prevent Stains on Trainer Skins**

Avoid using colored, plastic gloves as they may discolor the trainer skin. Do not use felt-tipped markers, ink pens, acetone, iodine, or other staining medications near the trainer. Take care not to place the trainer on newsprint or colored paper. Staining may be permanent.

### **Specifications:**

#### **Temperature**

Temperature Limits: -15 Celsius to 50 Celsius

#### **Environment**

Max 90% relative humidity, non-condensing

#### **Material Chart**

Clothes: Cotton, Nylon

Skins and Airways: PVC

Inner Plastics: PVC, Polyurethane Foam

Metal Components: Aluminum, Steel

### **Replacement Parts**

For a complete list of replacement parts available, please visit [www.Laerdal.com](http://www.Laerdal.com).

### **Global Warranty**

See the Laerdal Global Warranty Booklet, or [www.Laerdal.com](http://www.Laerdal.com).





1005403

© 2015 Laerdal Medical. Gatesville, TX.  
All rights reserved.  
1005403 Rev D



**Laerdal**  
*helping save lives*