

Reusable (Non-Sterile)
REF 0803-0105
Reorder number: 0270-0674 (x10)

GlideRite® DLT Stylet

For Double Lumen Tubes

To provide support for double lumen tube during tracheobronchial intubation. For use in 6.0 mm & larger double lumen ventilation tubes.

The GlideRite® DLT Stylet was designed to help enable the placement of a double lumen tube. The rigidity of this reusable stylet helps the user manipulate the tube as desired for intubation.

WARNINGS

1. Product is NON-STERILE—clean before use.
2. DO NOT use if the product appears damaged—INSPECT before use.
3. During use, the stylet should NOT protrude beyond the end of the double lumen tube.
4. The stylet must not advance into the glottis under any circumstances, due to the rigidity of the double lumen tube.
5. DO NOT allow the stylet to advance past the vocal cords; the ventilation tube should be advanced off the stylet into the airway.

CLEANING

1. The product MUST undergo high-level disinfection prior to use.
2. The product must be cleaned of all visible contamination before disinfection.
3. Approved disinfection solutions are: .55% Ortho-Phthalaldehyde, 7.5% Hydrogen Peroxide and 3.4% Glutaraldehyde. Follow the chemical cleaner manufacturer's instructions for specific cleaning cycle parameters.
4. Disinfection with high-concentration chlorine solutions (>5000 ppm) may result in stainless steel rod corrosion.

STERILIZATION (for end user convenience)

If desired, the product can be sterilized using a minimum 4 minute 132 °C (270 °F) pre-vacuum steam sterilization cycle.

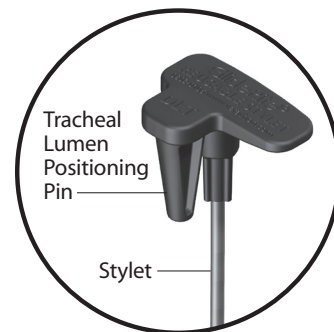
INSTRUCTIONS FOR USE

Right and Left Sided Double Lumen Tube

1. Introduce the GlideRite® DLT Stylet into the double lumen tube through the bronchial lumen. Do not permit the stylet to extend past the distal end of the tube.
2. Rotate the double lumen tube to change the natural bend of the tube; secure the tracheal lumen by inserting the positioning pin. The bronchial tip should now aim posteriorly while the tracheal channel is aimed anteriorly.
3. Place the DLT Stylet and tube at the glottic opening; shorten the stylet 5-6 cm with the tracheal lumen facing anteriorly and the bronchial lumen pointing down the trachea as it advances.*
4. Completely remove the DLT Stylet and proceed with the intubation using your preferred technique and experience.
5. Check the depth of insertion and location.

* Clinical use suggests that there are 3 common anatomical points at which a double lumen tube may fail to advance. The first is at the vocal cords, where the tip of the bronchial lumen may “hang up”. The second is at the arytenoids, where the tracheal lumen may impact the anatomy. The third is at the cricothyroid membrane depression where the bronchial tip may impact the anatomy.

The use of a GlideScope® video laryngoscope with the GlideRite® DLT Stylet may help overcome these obstruction points. Designed to complement the use of GlideScope® video laryngoscopes.



ORDERING AND SUPPORT

+ 800.331.2313 (US & Canada); Fax: 425.883.2896




Read all instructions
prior to use



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