Laryngeal Electrode Intubation Instructions

Reliable performance of LSE500 electrodes requires proper positioning. Please follow these instructions carefully and avoid using long-acting paralytics.

1. Choose any non-silicon ET tube and the appropriate electrode based on the ET tube size chart below:

<table>
<thead>
<tr>
<th>Electrode</th>
<th>LSE500DCL</th>
<th>LSE500DCS</th>
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</thead>
<tbody>
<tr>
<td>ET Tube</td>
<td>10.0 - 7.5</td>
<td>7.0 - 6.0</td>
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2. Turn over and straighten the ET tube to expose what will be the posterior side when intubated. Use of a straightened stylet facilitates hands-free straightening of the ET tube.

3. Remove the paper backing from the electrode and apply at least 1 inch above the balloon and with the wires directed toward the mouth. (fig.1)

4. Align electrode's midline with the midline of the posterior portion of the tube. Press electrode down, wrapping it toward the top (anterior) side of the ET tube. One edge should overlap the other. (fig.2)

5. A small amount of lubricant may be applied to the electrode. Insert the ET tube under direct vision so that each vocal cord is touching its respective pair of conductive plates and rests between the two blue positioning stripes. (fig.3)

6. Note the depth number on the ET tube against the maxillary central incisors before any further positioning of the patient.

7. After final positioning of patient, align ET tube in the middle of the pharynx behind the tongue. The posterior portion of the ET tube should be directly opposite the central maxillary incisor gap at the depth number noted after initial positioning.

8. Tape the ET tube securely with 2 pieces of tape by wrapping each piece first around the tube and then securing to the upper lip. (fig.4)

9. Tightly secure the breathing circuits so the ET tube will not rotate or be displaced and then verify final electrode position by laryngoscopy with a #3 Miller Blade.

10. Attach the two red lead wires to the + and - EMG terminals of channel 1 and the blue lead wires to channel 2. Apply an EMG ground.