Leading the way in visualisation

Ambu® aScope™ 2, Ambu® aScope™ 3 and King Vision
A new generation of airway visualisation devices

Successful airway management can make the difference between life and death. Ambu’s new range of single-use visualisation devices – consisting of the flexible videoscopes aScope 2, aScope 3 and the King Vision video laryngoscope – assists the clinician to become successful, whether confronted with a routine or difficult airway.

Single-use, safe and affordable
Combining the convenience of a single-use device with a superior image quality and user-friendliness at an affordable price, aScope 2, aScope 3 and King Vision are a completely new generation of airway visualisation devices. With a reduced risk of cross-contamination, this highly complementary visualisation range from Ambu improves patient safety when assisting clinicians in successful airway management procedures.

That’s Ambu. Leading the way in visualisation.

Visualisation: The new standard in airway management

The standards in airway management are changing – The clinical airway community is increasingly embracing visualisation devices to enhance patient safety and control costs. This trend is further accelerated as clinical studies document the benefits of using advanced visualisation equipment. It is also reflected in the latest guidelines – Both the ASA guidelines on Difficult Airway Management and the extensive NAP 4 Report from the UK underline the importance of adding visualisation devices to the toolbox in airway management.

“Insufficient availability of equipment for management of the difficult airway and the proper training in the use of this equipment were considered among major causative or contributing factors to poor outcomes. Immediate access to a fibrescope for airway inspection or for difficult airway management was a recurrent problem”

NAP4 - 4th National Audit Project of The Royal College of Anaesthetists

“One of the significant changes in the 2013 Difficult Airway Algorithm is that video laryngoscopy can and should be considered both as an initial approach to intubation (awake or following induction) and following failed intubation in which face mask ventilation is inadequate. The video laryngoscope is now listed as one of the suggested devices in the portable storage unit for difficult airway management”

Carin Hagberg, ESA 2013 on the ASA 2013 Difficult Airway Algorithm

“Ambu® aScope™ 2 is an acceptable alternative in the management of unexpected difficult airway cases such as difficult intubations and dislodged tracheal tubes when a multi-use fibreoptic endoscope is unavailable”

“Making the Ambu aScope 2 available for use in the typical clinical setting is likely to improve outcomes and improve patient safety”

NICE guidance MTG44, July 2013

1 Cook T et al., NAP4 - 4th National Audit Project of The Royal College of Anaesthetists and The Difficult Airway Society, Major complications of airway management in the United Kingdom, Report and findings, March 2011
2 http://guidance.nice.org.uk/MTG44
**Ambu® aScope™ 3 system**

As the only sterile single-use scopes available for intubation and bronchoscopy aScope 3 and aScope 3 Slim solve three key challenges: they are instantly accessible, sterile straight from the pack and they require no further handling and reprocessing. aScope 3 is ideal for a wide range of endoscopic procedures: from intubation and bedside bronchoscopy procedures to training of intubation and bronchoscopy skills.

aScope 3 is likely to be cost saving for use in unexpected difficult airways in remote hospital units, operating theatres and intensive care units1.

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**Accessible**

Choosing aScope 3 and aScope 3 Slim is about enhancing patient safety. It is about ensuring immediate access to a flexible videoscope in the clinical setting, in the training and maintenance of flexible endoscopy skills.

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**Sterile**

Sterile straight from the pack aScope 3 offers a unique opportunity to eliminate the risk of cross-contamination.

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**Easy**

The portable plug-and-play aScope 3 system is easy to relocate and set up. There is no further handling and reprocessing after use.

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1. Guidance.nice.org.uk/mtg14

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**aScope 3**

- Insertion cord diameter 5.0 mm
- Channel width of 2.2 mm
- Connection for fixation of ET tube
- Bending angle of 150°/130°

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**aScope 3 Slim**

- Insertion cord diameter 3.8 mm
- Channel width of 1.2 mm
- Connection for fixation of ET tube
- Bending angle of 130°/130°

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**aView**

- Clear high resolution image
- Portable touch screen monitor
- Operational in seconds
- Intuitive user interface
- Easy file transfer by USB
- Minimum 3 hours battery time

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**Leading the way in visualisation**
King Vision® has been designed with the intention to make a revolutionary series of high performance portable video laryngoscopes. The King Vision® combines the convenience of a durable reusable, video display with a disposable blade at a price that’s affordable for all of your intubations, difficult and routine.

The King Vision® is ergonomically designed to provide minimal lifting of soft tissue and impact on teeth.

**Portable**

The King Vision® is lightweight, self-contained, battery operated and water resistant. The King Vision® can be used continuously for more than 1 hour making it highly portable. Blades are individually packaged. Each blade is disposable, eliminating concerns on cross contamination.

**Affordable**

Disposable blades allow economical use of the King Vision® video laryngoscope for all intubations. With the King Vision® you can improve patient care by having high performance visualisation capabilities for every intubation, at an affordable price.

**Durable**

Designed to be your primary tool for all intubations. Video output capability is compatible with external monitors and recording devices. The robust, full-colour, non-glare display can resist repeated cleaning and normal use wear and tear.

**King Vision**

- Full colour OLED display
- Protective gasket
- Ergonomic design
- Disposable blades, channelled and standard
- Guiding channel
- New optics and light
- New anti-fog lens

Leading the way in visualisation
Ambu has several key support products to complement the aScope and King Vision range. The aScope 2 is especially useful in difficult intubation cases and PDT’s.

The Aura-i laryngeal mask has been developed to go hand-in-hand with the aScope in a rescue situation to facilitate ETT intubation through the SGA. With the Aura-i in place the patient is always ready to be intubated and a critical situation may be avoided.

**aScope 2**
The aScope 2 is a single-use flexible intubation scope for difficult airway intubations and PDT procedures. The aScope 2 provides a simple, cost-effective way to simplify hospital processes and increase patient safety.

**Aura-i**
Aura-i™ is a disposable laryngeal mask designed for everyday use. Aura-i is the preferred everyday routine device for establishing an airway where an ET-tube is deemed unnecessary. At the same time it holds a place on the difficult airway cart.

In case of a “Cannot Intubate – Cannot mask Ventilate” (C-I-CV) situation, where the end-game is to intubate the patient, Aura-i can be used as a conduit for direct endotracheal intubation assisted by a flexible scope such as the aScope 2 or 3.

**aScope 3 Slim**
- Insertion cord diameter 3.8 mm
- Channel width of 1.2 mm
- Connection for fixation of ET tube
- Bending angle of 130°/130°

**Aura-i**
- Built-in anatomically correct curve for fast and easy insertion
- Intubating capability using standard ET-tubes
- Reinforced tip resists folding over during insertion and plugs the upper esophageal sphincter
- Bite resistance in the connector block prevents occlusions
- Convenient depth marks for monitoring correct position
- Pilot balloon identifies mask size and provides precise tactile indication of degree of inflation
- Navigation marks for guiding flexible scope

Leading the way in visualisation
Product and clinical application matrix

<table>
<thead>
<tr>
<th>Suggested clinical procedure</th>
<th>OR</th>
<th>ICU</th>
<th>ER</th>
<th>Resuscitations</th>
<th>Crash Carts</th>
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Note: In regard to placement of DLT, aScope 3 and aScope 2 are compatible with DLT size 41 Fr. aScope 3 Slim is compatible with DLT size 37 and up and BB size 5-9.

### Intensive Care Unit:
Immediate accessibility, portability and fast set-up as well as no risk of cross-contamination make aScope 3 ideal for bedside procedures in the ICU. With an aScope 3, the patient can be treated immediately when needed without having to wait for the arrival of a reusable scope and stacking system. The sterile aScope 3 ensures that culture samples obtained during bronchial lavage are not contaminated.

The aScope 3 is suitable for a range of bedside procedures in the ICU:

- Airway inspection
- Tube check & intubation
- Management of retained secretion
- Bronchial lavage
- Percutaneous tracheostomy
- Training of bronchoscopy skills

Due to its portability and simplicity the King Vision is also a highly relevant product in the ICU for tube exchange and intubation.

### EMS:
Urgent airway management in the emergency situation concerns securing the airway and maintaining appropriate ventilation. In these situations the patient outcome is highly dependent on simple and efficient procedures. The King Vision is a relevant device for airway management in the pre-hospital setting/area due to its simplicity and portability. The King Vision is a simple two piece construction which makes it easy and quick to setup. With the choice of two different blade types operators are able to use the King Vision with their preferred technique.

King Vision is suitable for a range of procedures in EMS:

- Routine intubation
- Difficult intubation
- Foreign body removal

### Operating room & Emergency room:
Whether in the Operating Room or Emergency Room the access to visualisation equipment is vital when an unexpected situation occurs. Simple guidelines and available visualisation equipment should be an integral part of effective airway management in the above clinical settings.

Ambu’s visualisation range is suitable for installation in every OR/ER to support local guidelines of difficult airway management. With the combination of the King Vision and the aScope 3 every airway can be secured - from the routine intubation to complex awake intubations or unexpected difficult airways.

The Ambu aScope and King Vision are suitable for a range of procedures in the OR:

- Airway examination
- Routine intubation
- Difficult intubation
- Placement of DLTs for thoracic surgery
- Awake intubation

### Difficult airway trolley/cart:
Difficult airway intubations occur with a relatively low frequency. It is of vital importance to have a device at hand which is quick and intuitive to use.

King Vision is a very suitable device to consider for difficult airway trolleys or packs as it is highly portable, simple and intuitive to use.

### Complex airway management, both in and out of the operating room setting, continues to be a challenge, and having the appropriate equipment and training can potentially reduce adverse events.

Carin Hagberg, ESA 2013

“Have you considered the consequences for you and for your patients of not having a flexible scope available when you need it?”
## Ordering Information

### aScope 3 System

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<th>Item no.</th>
<th>Description</th>
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### King Vision

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### Aura-i

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US: Aura-i, King Vision, aScope 2 and aScope 3 RX only.

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