IFU

Total Control Introducer[™]Si (TCI[™]SI)

Pre-lubricated articulating introducer with intuitive colored depth system

000946 #4 Oral 001179 #3 Pediatric Oral/Nasal 001180 #2.5 Pediatric Oral/Nasal 001181 #2 Oral/Nasal 001182 #5 Nasal 001183 #4 Nasal 001184 DLT (39Fr/41Fr) 001185 DLT (35Fr/37Fr)

INTENDEDUSE

The Total Control Introducer™ is intended to facilitate endotracheal. intubation

NOTE: This includes both nasal and oral endotracheal intubation with a video larvngoscope or direct larvngoscope.

DEVICE DESCRIPTION

TCIMSi size

The Total Control Introducer[™]Si (TCI[™]Si) product family includes dynamic introducers capable of steerable navigation into the trachea to facilitate endotracheal tube placement during tracheal intubation. The devices have rounded tips with centimeter markings as well as color zonal markings to facilitate placement and use. The distal end of the catheter is curved with a tip that articulates to facilitate steering through the upper airway and into the trachea under visualization with a larvngoscope. Intended for one-time use. The devices are supplied sterilized by Ethylene Oxide (EO) in peel-open packages.

Different sizes and subtypes of the TCITMSi are available to facilitate single lumen endotracheal tubes in adult and pediatric patients and double lumen tubes in adults. The subtype and size $TCI^{TM}Si$ should be appropriate for patient and endotracheal tube (ETT) type. Endotracheal tube and size capabilities of each size and subtype of the TCITMSi are detailed below.

Total Control Introducer™Si Models Route

FTT Tyne

Min FTT

Patient age

107 373120	(years)	noute	LITTYPE	size
#2 Pediatric	2y-5y	Oral/Nasal	Oral/Nasal	4.5 mm ID
#2.5 Pediatric	6y-10y	Oral/Nasal	Oral/Nasal	4.5 mm ID
#3 Pediatric	11y-16y	Oral/Nasal	Oral/Nasal	6.0 mm ID
#4 Adult Oral	>16y	Oral	Oral	6.0 mm ID
#4 Adult Nasal	>16y Height <182 cm	Nasal RAE	Nasal RAE	6.0 mm ID
#5 Adult Nasal	>16y Height>182 cm	Nasal RAE	Nasal RAE	6.0 mm ID
DLT 35F, 37F	Adult	Oral	Double Lumen Tube	35 French 37 French
DLT 39F, 41F	Adult	Oral	Double Lumen Tube	39 French 41 French

CONTRAINDICATIONS

- Entrance to the trachea cannot be visualized when performing laryngoscopy, i.e., Grade III or Grade IV Cormack & Lehane laryngoscopy classification.
- Inability to place a laryngoscope into patient's airway
- Patients with abnormal tracheal anatomy Patients with existing or potential tracheal trauma Inability to visualize the colordepth-zone system throughout the procedure
- Children under the age of 2 years old
- Do not use via the nasal route in patients with abnormal coagulation
- · Do not use via the nasal routein patients with midface trauma

WARNINGS

- CAUTION: U.S. Federal Law restricts this device to sale by or on the order of a physician (or properly licensed practitioner).
- The TCITMSi are supplied sterile for single use only. It should be discarded after use and must not be re-used. Reuse may cause cross infection and reduce product reliability and functionality.
- Store devices in an environment that avoids direct sunlight and extremes of temperatures.
- · Excessive force must be avoided at all times.
- To avoid trauma to the lungs, bronchial injury, or pneumothorax, examine the patient's anatomy to help determine the optimal placement for the TCITMSi. Ensure the introducer is in the clinician-preferred location relative to the carina by referencing its centimeter markings or color-zoned-tip.
- Care must be taken not to provoke injury to the epiglottis and glottis, perforation ofthe sinus pyriformis, bronchus, ortrachea.
- Ensure that the appropriate TCITMSi subtype is appropriate for patient age and size.
- Ensure that the appropriate TCITMSi subtype is appropriate for endotracheal tube size and type.
- Lubricatethe introducertip, frontshaftand back shaftsurfacesand the endotracheal tube before loading on the back of the introducer.
- Preload the endotracheal tube onto the back of the introducer behind the handle prior to use.
- Care must be taken when introducing/removing the catheter

introducer from the endotracheal tube; contact with sharp edges on the internal surface of the endotracheal tube may cause small fragments to be shaved off the catheter introducer during introduction/removal.

- Possible allergic reactions should be considered.
- Do not reattach the handle to the introducer after it has been removed. If the handle is prematurely detached or the introducer is inadvertently backedout of the trachea, remove the introducer from the patient and ventilate and reassess the intubation plan. Open a new TCITMSi if the intubation plan indicates use.

PRECAUTIONS

- The product is intended for use by clinicians trained and experienced in airway management.
- If intubation cannot be completed, the ET tube and the introducer should be removed.

INSTRUCTIONSFOR USE

- Confirm the TCITMSi package is unopened and undamaged. Note:
 Do not use the product if there is doubt as to whether the product is sterile. Upon removal from the package, inspect the product to ensure no damage has occurred.
- Confirm that the appropriate subtype and size of TCITMSi is used according to the patient and procedure needs.
- Lubricate and preload the endotracheal tube (ET tube) on the appropriate subtype TCI[™]Si.
- Place video laryngoscope (VLS) or direct laryngoscope to visualize vocal cords
- 5. Straighten tip of the $TCI^{TM}Si$ by squeezing the trigger with right hand.
- Insert the introducer tip into mouth or nose parallel to the blade of the VLS or direct laryngoscope under direct visualization until the tip of the introducer is no longer directly visible.
- Once the tip is no longer directly visible, release the trigger to articulate the tip anteriorly into the field of view of the VLS.
- If direct laryngoscope is used, the tip of the introducer should be directly visualized at all times until it has entered the trachea.
- Use the trigger to articulate the tip in the anterior or posterior direction as necessary. Rotate the handle to move the tip side to

- side as necessary to steer the tip to the opening of the vocal cords.
- Once the tip is in the opening of the vocal cords, squeeze the trigger to articulate the tip posteriorly to facilitate passage down the trachea.
- 11. If resistance is encountered, DO NOT force the introducer. The trigger may be used to move the tip gently anteriorly and posteriorly as needed to maneuver down the center of the trachea. If resistance is continued to be encountered, remove the introducer, ventilate the patient and reassess the intubation plan.
- Insert the device into the trachea until the green zone of the colordepth-zone system is at the level of the vocal cords.
- 13. Remove fingers from the trigger entirely.
- Release handle from the introducer by pushing handle top forward using the thumb stop on the left rear of the top until a click is heard.
- 15. Open the top and remove the handle from the introducer shaft.
- 16. Pass control of the VLS to an assistant to maintain the view of the relationship between introducer shaft and the vocal cords.
- While maintaining the green zone of the color-depth-zone system at the vocal cords, advance the ET tube over introducer into the trachea.
- 18. Leaving the ET tube in place in the trachea, remove the introducer from the ET tube.
- 19. Remove VLS.20. Inflate the cuff of the ET tube (if present).
- 21. Ventilate patient.
- 22. Confirman endotracheal intubationwith end tidal CO2.

HOW SUPPLIED

Supplied sterilized by Ethylene oxide (EO) in peel-open packages. Intended for one-time use. Sterile if package is unopened and undamaged. Do not use the product if there is doubt as to whether the product is sterile. Store in a dark, dry, cool place. Avoid extended exposure to direct sunlight. Upon removal from the package, inspect the product to ensure no damage has occurred.

SHELFLIFE

5 years

Made in China

The meaning of the mark on the package

2	Do not re-use	•••	Manufacturer
Σ	Use-by date	₩ CN	Date of manufacture and country of manufacture
LOT	Batch code	EC REP	Authorized representative in the European Community
STERILE EO	Sterilized using ethylene oxide	茶	Keep away from sunlight
®	Do not use if package is damaged	*	Keep dry
[]i	Consult instructions for use	REF	Catalogue number
(€ 0197	CE marking of conformity	LATEX	Latex free
SBS	Single sterile barrier system	MD	Medical Device
(Me)	MR unsafe	DEHP FREE	Doesn't Contain DEHP



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