

Pulmodyne®

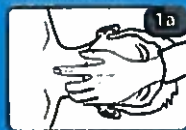
Control-Cric™ Training Kit Quick Reference Guide

Items Included in Kit:

1 Cric-Key™
1 Cric-Knife™
1 Package of Lubricant

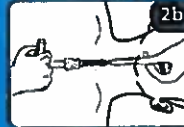
1 Neck Strap
1 Extension Tube
1 Wedge

1



- A. Position patient supine and identify the cricothyroid membrane. Stabilize the larynx with thumb and middle finger with non-dominant hand.
- B. Use the Cric-Knife to incise skin. A vertical skin incision from mid-thyroid cartilage to the cricoid cartilage is recommended (usually about 2 finger breadths). In patients with a thick neck a longer incision may be needed. A horizontal skin incision may be used when landmarks are evident.
- C. After palpating the cricothyroid membrane, turn the Cric-Knife to a horizontal position over the cricothyroid membrane. Push the blade downward, perpendicular to the trachea, until the blade is fully inserted and the airway is entered.

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- A. While maintaining downward force, slide the tracheal hook down the handle with your thumb until the hook is felt to enter the trachea, and it disengages from the handle. Grab the tracheal hook with the non-dominant hand, lifting up on the thyroid cartilage.
- B. Insert Cric-Key through incision. Confirm placement by moving the device along anterior wall of trachea to feel for the tracheal rings. Indicators of incorrect placement could be: tenting of the skin, difficulty advancing the Cric-Key tube, or lack of tactile feedback from the tracheal rings.
- C. Once placement has been confirmed, advance Cric-Key tube to the flange. Stabilize the Cric-Key tube and pivot the tracheal hook toward the patient's shoulder to remove from airway.

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- A. While stabilizing the Cric-Key tube, remove the Cric-Key introducer. Inflate the cuff until resistance is met.
- B. Confirm placement. Secure with stabilizing strap.
- C. Attach manual resuscitator. Ventilate and auscultate lung fields. Reassess.

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