# Ambu® aScope™ 3 Slim 3.8/1.2

### The ultra slim single-use flexible scope



### **Key Benefits**

- · Instant availability
  - Always at hand when needed, saving valuable time and enhancing patient safety.
- · High degree of usability

The portable, plug and play system is easy to transport and set up. It is ready for use in no time.

- Cost effective
  - Reduced costs due to low capital investment, no reprocessing or repair costs and higher workflow efficiency.
- No risk of cross-contamination
  Sterility straight from the pack minimizes the risk of cross-contamination.

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### Availability of bronchoscopes is a general problem

Insufficient availability of equipment for management of the difficult airway in the OR, ER and ICU was considered among the major causative factors contributing to poor patient outcomes in the NAP4 Audit<sup>1</sup> conducted in the UK.

# Intubation and bronchoscopy made easy – in the OR, ER, and ICU

aScope 3 Slim is an ultra slim, single-use, flexible scope that once and for all solves the problem of accessibility, simplifies set-up procedures and eliminates the need for complex cleaning procedures thus releasing valuable resources for other procedures.

With its small outer diameter, a Scope 3 Slim is an alternative to reusable scopes as it is suitable for a wide range of bronchoscopic procedures: from intubation to the placement and control of double lumen tubes and bronchial blockers in the OR. The ultra slim design makes the aScope 3 Slim ideal for placing an ET tube  $\geq$  5 mm or a DLT  $\geq$  size 37 Fr.

When connected to the portable monitor,  $Ambu^{\otimes}$  aView<sup> $\mathbb{M}$ </sup>, a high-resolution image enables easy navigation and fast identification of anatomical landmarks.

#### Enabling you to provide the best care

By switching to the single-use aScope 3 Slim you enhance patient safety by ensuring immediate access to a flexible scope and minimizing the risk of cross-contamination.

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



## **Specifications**

O-tilt		
Optical system		
Field of View	85°	
Direction of View	o° (forward viewing)	
Depth of Field	8-19 mm	
Illumination method	LED	
Insertion portion		
Bending section	130° up, 130° down°	
Insertion cord diameter	3.8 mm (0.15")	
Distal end diameter	4.2 mm (0.16")	
Maximum diameter of insertion portion	4.3 mm (0.17")	
Minimum endotracheal tube size (inner diameter)	5.0 mm	
Minimum double lumen tube size (inner diameter)	37 Fr	
Working length	600 mm (23.6")	
Channel		
Average inner diameter	1.2 mm (0.047")	
Minimum instrument channel width	1.2 mm (0.047")	
Suction connector		
Connecting tube inner diameter range	07mm +/- 1mm	
Operating environment, storage & transportation		
Temperature - transportation	10 ~ 40° C (50 to 104° F)	
Temperature - operating environment	10 ~ 40° C (50 to 104° F)	
Temperature - storage	10 ~ 25° C (50 to 77° F)	
Relative humidity	30 ~ 85%	
Atmospheric pressure	80 ~ 109 kPa	
Altitude	≤2000m	
Sterilisation		
Method of sterilisation	EtO	



Ambu® aScope™ 3 Slim and Ambu® aView™

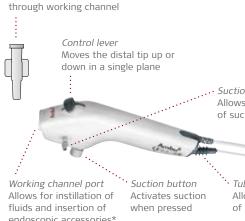


Ergonomic and lightweight handle designed for optimal user comfort

### Ordering specifications

syringes and soft endoscopic accessories

Item no.	Quantity (Ambu® aScope™ 3 Slim 3.8/1.2)
402001000	5
Introducer To facilitate introduction of Luer Lock	



endoscopic accessories\*

Suction connector Allows for connection of suction tubing

· Tube connection Allows for fixation of ET tubes

Bending section Manoeuvrable part with bending angle of 130°/130°

> Distal end Contains the camera, light source (two LEDs), as well as the working channel exit

#### Ambu A/S

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