



# BERMAN DISPOSABLE OROPHARYNGEAL AIRWAY

USER MANUAL



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## Intended Use

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The tongue is the most common cause of airway obstruction in an unconscious person. Keeping the tongue from blocking the air passage is a high priority.

Berman Oropharyngeal (oral) airways (OPAs) are usually made of a single piece of plastic but possess 2 lateral channels to guide side catheter channels into the laryngopharynx whilst continuing to maintain the airway between the mouth and the posterior pharyngeal wall to establish ventilation channels.

## Specification

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### Material: LDPE (Low Density PE)

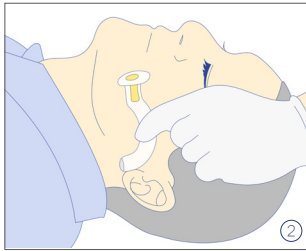
Item No.	Size	Length	Color	Type
AM-DBA-M05-TBA-000	000	40mm	Pink	Neonate
AM-DBA-M05-TBA-00	00	50mm	Blue	Infant
AM-DBA-M05-TBA-0	0	60mm	Black	Pediatric-S
AM-DBA-M05-TBA-1	1	70mm	White	Pediatric
AM-DBA-M05-TBA-2	2	80mm	Green	Adult-S
AM-DBA-M05-TBA-3	3	90mm	Yellow	Adult-M
AM-DBA-M05-TBA-4	4	100mm	Red	Adult-L
AM-DBA-M05-TBA-5	5	110mm	Orange	Adult-XL

## Operation Instruction

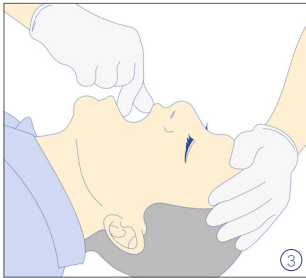
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- ① Open the patient's mouth and clear all the airway excretions (apply emergency aspirator if available).

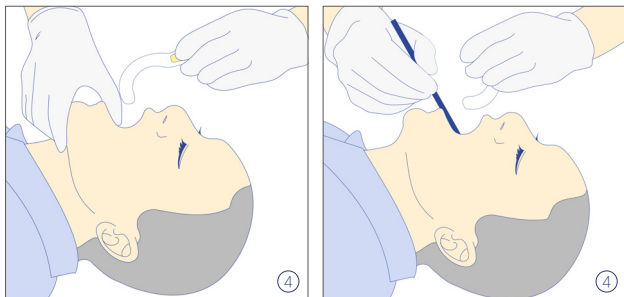
## Operation Instruction



- ② Measuring the OPA from the patient's earlobe to the corner of mouth to select an appropriate sized OPA for the patient.



- ③ Use the cross-finger technique to open the victim's mouth.



- ④ Insert the OPA.

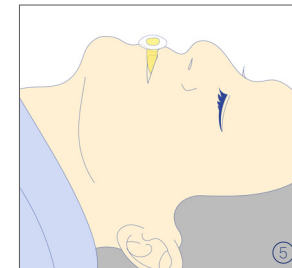
## Operation Instruction

### For Adult:

- Grasp the victim's lower jaw and tongue and lift upward.
- Insert the OPA with the curved end along the roof of the mouth.
- As the tip approaches the back of the mouth, rotate it one-half turn (180 degrees).
- Slide the OPA into the back of the throat.

### For Child or Infant:

- Use a tongue blade or a tongue depressor and insert the OPA with the curved end along the tongue. Or:
- Insert the OPA sideways and then rotate it 90 degrees.



- ⑤ The flange should rest on the victim's lips to ensure correct placement.

## Caution

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- ① The users of Oropharyngeal Airway must have specialized skills or have been trained.
- ② Before inserting an OPA, be sure the victim is unresponsive; has no oral trauma, such as broken teeth; and has not had recent oral surgery.
- ③ If the victim vomits, remove and suction the airway, ensuring all debris is removed from the airway. Thoroughly clean the device and reinsert the OPA only if the victim is still unconscious and does not have a gag reflex. If the victim gags, remove the OPA immediately.
- ④ Once you have positioned the device, use a resuscitation mask or bag-valve-mask resuscitator (BVM) to ventilate a non-breathing victim.

## Warning

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- ① If placed improperly, it can depress the tongue into the back of the throat, further blocking the airway.
- ② OPAs should not be used if the victim has suffered oral trauma, such as broken teeth, or has recently undergone oral surgery.
- ③ This product had been sterilized by ethylene oxide gas, discard after single use.
- ④ FirstCare is not responsible for any consequences of re-use of the disposable Oropharyngeal Airways.

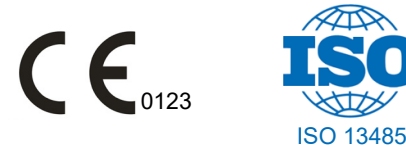
## Storage

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The products should be stored in a cool, dark and dry place with temperature not higher than 49 °C and without corrosive gas. Good ventilation should be ensured.

## Certificate

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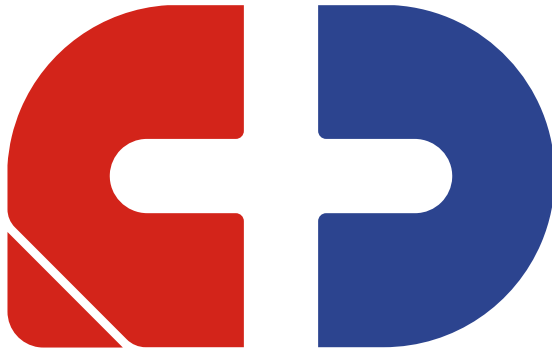
## Warranty

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This equipment is manufactured from the finest quality materials. Each individual part is subject to strict quality control tests to ensure exceptionally high standards.

The manufacturer warrants to the purchaser of FirstCare Oropharyngeal Airway that its component parts are free from defects in material and workmanship for a period of one year from the date of purchase. The manufacturer will replace and/or repair the airway at its option for one year from the date of purchase at no cost to the purchaser, upon the notification of the defects, in writing by the purchaser. All shipping costs shall be borne by the purchaser.

The manufacturer shall be liable under this warranty only if the Oropharyngeal Airways have been used in the normal manner described in the instruction manual.



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