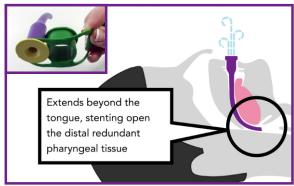
About the McMurray Enhanced Airway (MEA)

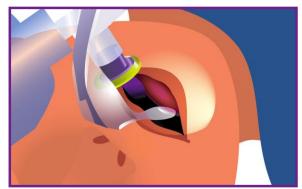
The first distal pharyngeal airway (DPA)

Designed to quickly mitigate hypoxia • Ideal for OSA, older and obese patients • Suitable for most patients approximately 5ft-6ft in height

The multipurpose DPA

- 1. Relieves upper airway obstruction
 - · Fits alongside EGD bite block
 - No setup needed
 - Elongated cushioned bite block
 - Upon a negative gag reflex, place between molars
- 2. Provides a pneicoxygenation to patients who are prone to hypoxia or difficult to intubate
 - Slide the MEA to the left side of the mouth, connect the MEA to the anesthesia circuit or BVM and intubate around it
- 3. Facilitates intraoral positive pressure ventilation (IOV)
 - Avoids challenging mask ventilation, especially with obese, OSA, edentulous, or bearded patients
 - IOV accomplished either manually or with a mask





Manually

- 1. Place patient's chin slightly in your left palm
- Place thenar web space around MEA base
- 3. Pinch nares closed with thumb and index finger
- 4. Bring lips up to seal with palm



With a Mask

- 1. Place MEA midline
- 2. Attach straight connector (not included) to MEA connector
- 3. Place straight connector through the mask's hole
- Couple to BVM or anesthesia circuit



For Sucessful Placement - 3 Easy Steps



2

Assess Readiness

Patient has a negative gag reflex



3

Place

Curve facing palate and slide between the molars

- If measured too long when sizing, withdraw until correctly placed – keep some molars on bite block
- No lubrication, rotation or tongue depressor routinely needed

For a step-by-step video and more