

Too often, intubation is like flying blind...

when direct laryngoscopy fails to provide a view. Under these circumstances, the best practitioners rely on their skills and professional experience to secure the airway; but without a view, there remains a substantial degree of uncertainty.

Saturn's line of GlideScope Video Laryngoscopes offers

a view 99% of the time.*

Even in difficult airway intubations the GlideScope system achieves a Cormack-Lehane (C/L) grade I or II view 99% of the time. Visualization of the airway helps build confidence and is an incredibly valuable teaching tool for young anesthesiologists.

The GlideScope System's integrated camera and patented anti-fogging mechanism has been designed to Endotracheal tube entering the epiglottis make visualization and the passage

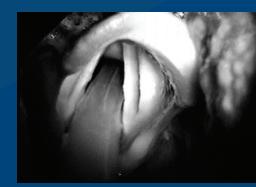


Image courtesy of Dr. John Doyle, MD, PhD, FRCPC

of an endotracheal tube into the airway safe and reliable. The patented design of the GlideScope blade offers a consistent, unobstructed view of the larynx and vocal cords 99% of the time.

The view may not be pretty, but it may just save a life.

Since 1999, Saturn has been researching and developing innovative medical technologies that aim to become the new standard for medical professionals. We have formed strong alliances with senior medical researchers and airway specialists around the world and continue to look for new ways to strengthen the practice of medicine.

GLIDE/COPE®

Video Laryngoscope

All video laryngoscopes can be used interchangeably with both Classic and Portable monitors.





Neonatal:

Blade Length (tip to handle): 48 mm Blade Thickness (max): 14.5 mm Blade Width (max): 16 mm Patient Weight: approx. 3-10 kg Camera: colour



Pediatric (mid-size):

Blade Length (tip to handle): 82 mm Blade Thickness (max): Blade Width (max): Patient Weight: Camera:

14.5 mm 19 mm approx. 10+kg colour



Lo Pro (adult):

Blade Length (tip to handle): Blade Thickness (max): Blade Width (max): Patient Weight: Camera:

101 mm 14.5 mm 26 mm approx. 15+kg colour

System Configurations



GlideScope Portable System in Hard Shell Case

Total Weight: approx. 4 kg

The Portable monitor can operate from within or independent of the hard shell case. Ideal for mobile and/or remote emergency applications.



GlideScope Portable System on Mobile Stand:

Power Source: Battery and/or AC power

A stand alone configuration for use in a variety

GlideScope Portable System on IV Pole Mount:

Easily integrates into all standard hospital environments.





GLIDE COPE® Video Laryngoscope





GlideScope Standard Adult:

Blade Length (tip to handle): 101 mm
Blade Thickness (max): 18 mm
Blade Width (max): 23.5 mm
Patient Weight: approx. 15+kg
Camera: available in black & white and colour models



Power Source: AC power For stand alone use in all hospital settings. The Classic monitor is also suitable for use with the IV pole mount (as shown with Portable system).

* "Excellent (C/L 1) or good (C/L 2) laryngeal exposure was obtained in 92% and 7% of patients respectively. In all 133 patients in whom both GlideScope and direct laryngoscopy were performed, GlideScope resulted in a comparable or superior view."

Richard M. Cooper MSc, MD et al. Canadian Journal of Anesthesiology 2005, 52:2, pp 191-198



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ISO certified quality system

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The new standard in airway management