Endotracheal Tubes

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- New Atomizer allows full control of medication to make patient comfortably numb!
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Summer marks the halfway point for my presidency—so much to do and so little time! The summer weather isn’t the only thing that is heating up right now.

Plans for the Annual Meeting in October are moving right along. We have a special guest speaker this year—one that many of you have asked that we invite back, since hearing him speak a decade ago. If you have heard Dr. Clayton Petty speak before, you know what an inspiration he is. If you have never had the opportunity to hear Dr. Petty speaking live, you must register to attend this meeting! Along with Dr. Petty we have many other excellent speakers and presentations planned. Dr. Wei Chao is returning as a speaker, as is Sue Christian, Cer.A.T.T. And if you are a fan of the Parker Flex-tip ETT, you will definitely want to meet Dr. Jeff Parker.

I have also been busy helping Josephine Trinidad, Cer.A.T., to plan the annual ASATT Region 5 meeting. I am excited to showcase my hometown on the Western slopes of the Rockies for this meeting.

Our new management company has taken over the reins for the day-to-day management of ASATT. The transition has been very smooth. I know that they have been fielding phone calls and e-mails from ASATT members, and they are getting to know us and our little quirks. You can really help them by ensuring that they have your correct contact information. Annual dues notices will be mailed out shortly; when you return these, in addition to a check, make sure that you update your contact information. We will continue to use the U.S. Postal Service, we hope to enhance our communication with the membership by utilizing e-mail notification and online registrations, dues renewals, etc., in the near future. We can’t do this if we don’t have a current e-mail address for you. If you are reading this, hopefully it is because you are a current member and you received The Sensor in the mail. If you had to borrow it, or you read it online because yours never arrives, it is probably because we don’t have your correct address in the database. That also means we can’t send you your dues renewal notice or your recertification package.

I enjoy the e-mails and phone calls I get from ASATT members and prospective members, and the opportunity to get to meet you and chat about issues that concern us all. It always amazes me, though, that people think that I am something special. I am just a regular tech like you. I get up at 0430 and I am at work by 0600 (some days I am there at 0530). I set up the rooms, help the docs, do room turnovers, troubleshoot the equipment, juggle multi-tasking and try to leave before 1600 (so much for finishing at 1430). In my spare time, I teach an online anesthesia technology course. I am passionate about my job, about education and about patient safety, and I see these three elements as being part of a whole. I’m not about just clocking in and picking up a paycheck. I’m not different and I’m not special. I’m just like you. If you have a passion for something, if there is a change you would like to see within ASATT, let me know. Let’s work together to change the world one OR at a time.

— Maretta Grandona, Cer.A.T.T. ASATT President
## SCHEDULE OF EVENTS

### Thursday, October 11

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>1500-1800</td>
<td>Early registration</td>
</tr>
<tr>
<td>1600-1900</td>
<td>Exhibits open</td>
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<tr>
<td>1600-1900</td>
<td>Welcome Reception and Cash Bar</td>
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### Friday, October 12

<table>
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<tr>
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<tr>
<td>0600-0700</td>
<td>Registration / Continental Breakfast / View Exhibits</td>
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<tr>
<td>0700-0715</td>
<td>Welcome</td>
</tr>
<tr>
<td>0715-0815</td>
<td>Rakesh Vadhera, M.D. — Fluid Management</td>
</tr>
<tr>
<td>0815-0915</td>
<td>Wei Chao, M.D. — Airway Management</td>
</tr>
<tr>
<td>0915-0945</td>
<td>Break / View Exhibits</td>
</tr>
<tr>
<td>0945-1045</td>
<td>William Clayton Petty, M.D. — Equipment Troubleshooting #1</td>
</tr>
<tr>
<td>1045-1145</td>
<td>Shannon Sayers-Rana, Cer.A.T. — The Anatomy of Blood Products / Handling</td>
</tr>
<tr>
<td>1145-1300</td>
<td>Lunch / View Exhibits</td>
</tr>
<tr>
<td>1300-1400</td>
<td>Michael Mulroy, M.D. — Anesthesia Team Communication</td>
</tr>
<tr>
<td>1400-1500</td>
<td>Edwards Life Sciences — Understanding SVO2 Catheters and Cardiac Output (technicians and certified technicians only)</td>
</tr>
<tr>
<td>1400-1500</td>
<td>Edwards Life Sciences — Hands-on Central Line/ Swan placement assistance (certified technologists only)</td>
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*Adjourn until Saturday*

### Saturday, October 13

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>0600-0700</td>
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</tr>
<tr>
<td>0700-0715</td>
<td>Welcome</td>
</tr>
<tr>
<td>0715-0815</td>
<td>William Clayton Petty, M.D. — Equipment Troubleshooting #2</td>
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<tr>
<td>0815-0915</td>
<td>Sue Christian, Cer.A.T.T. — Recertification</td>
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<tr>
<td>0915-0945</td>
<td>Break / View Exhibits</td>
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<tr>
<td>0945-1045</td>
<td>Dr. Parker — Airway Management</td>
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<tr>
<td>1045-1300</td>
<td>Lunch/ASATT Annual Business Meeting</td>
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<tr>
<td>1300-1500</td>
<td>Airway Management Breakout Sessions × 6</td>
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</thead>
<tbody>
<tr>
<td>1200 noon</td>
<td>ASA Exhibits Open</td>
</tr>
</tbody>
</table>

*Program subject to change*
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- Designed for superior illumination with a whiter, brighter light source.
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Fiber-Optic Confirmation of Double-Lumen Endotracheal Tube Placement

by Chris Dunn, R.R.T., Cer.A.T.
Nebraska Medical Center, Omaha, Nebraska

Double-Lumen Endotracheal Tubes (DLTs) are commonly used in thoracic procedures to achieve lung separation or one-lung ventilation, and the Anesthesia Technician is often the one responsible for gathering and setting up the necessary supplies for the intubation.

However, if you feel a little confused when participating in DLT placement, let me assure you, you're not alone. What's all that scoping, clamping, listening and tube-turning about? If you work at a teaching institution, why does the staff anesthesiologist keep asking the resident “Where are you? What do you see? Do you see a hint of blue on the left?”

“Crew Resource Management” has the philosophy that every voice counts, whether it be the physician, CRNA, nurse, Anesthesia Technician or scrub tech. If something doesn’t seem right, then you should speak up. I believe DLT placement is one of these situations. If available, a video camera head can be attached to the fiber-optic bronchoscope (FOB) for all to see, further increasing patient safety and the chance of success.

Anatomy of the DLT

You may hear the double-lumen endotracheal tubes called by several different names: DLT, DLET, DLETT, and double-lumen endobronchial tubes, but all basically have the same anatomy with only slight variations by manufacturer. The DLT is simply two endotracheal tubes fused together that allow selective ventilation of either the right, left or both lungs. Most are made from disposable polyvinylchloride (PVC). The distal end of the DLT has an anterior curve to facilitate easier intubation and bronchial positioning. DLTs are designated as either right- or left-sided, and come in a variety of sizes.

The following table lists manufacturers of DLTs and the sizes they make, as well as their availability as either left (L) or right (R) sided tubes.

<table>
<thead>
<tr>
<th>Mallinckrodt</th>
<th>26Fr</th>
<th>28Fr</th>
<th>32Fr</th>
<th>35Fr</th>
<th>37Fr</th>
<th>39Fr</th>
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A stylet is included to assist with insertion. The stylet should be lubricated and placed down the bronchial lumen of the DLT, without extending past the distal tip.

There are two high-volume, low-pressure cuffs on a DLT — a clear or white tracheal cuff located just above the distal tracheal orifice, and a blue bronchial cuff located just above the end of the bronchial lumen. A right-sided DLT has an opening towards the distal end of the bronchial tube that is intended to sit at the level of, and ventilate the right upper lobe. Pilot balloons for cuff inflation and deflation are located at the proximal end of the DLT and are of the same color as their corresponding cuff. Minimal occlusion volume should be used to inflate the balloons until there is no leak. A specially designed 15mm Y-type connector is included to facilitate the attachment of the DLT to the breathing circuit.

Preparation

When gathering supplies for placement of a DLT, the following equipment should be included in addition to the standard intubation setup:

- **Various sizes of DLTs** — a 37F or 39F will fit the majority of adult patients. Having a DLT one size greater and smaller than you anticipate the patient will need is a good practice.
- **Bronchoscope** — Prior to induction, the bronchoscope should be checked to make sure it passes easily through both lumens of the DLT. A thin layer of water-soluble lubricant is often helpful. A pediatric bronchoscope may be needed for the smaller sized DLTs.
- **Video camera head** for the bronchoscope (if available)
- **Lubricant**
- **Anti-fog solution**
- **Ring forceps or tongue grabber**
- **Tube clamp** (without teeth so as not to damage the tube)
10cc syringe
3cc syringe
Standard endotracheal tube

Placement

A Macintosh is the preferred laryngoscope blade for DLT intubation. The Macintosh provides the maximum soft-tissue displacement and visualization to place the large DLT into the patient’s airway. The DLT should be handed off and introduced into the patient’s mouth with the bronchial lumen’s curvature facing anterior. When the anesthesia provider starts to advance the tube into the patient’s mouth, close attention should be paid to the patient’s dentition; the bronchial cuff being smaller, usually passes any sharp teeth without incident. However, the tracheal cuff may catch on a sharp tooth and tear. If this happens, you must extubate and prepare a new tube. A regular endotracheal tube should always be available in the event you may need to emergently intubate.

When the bronchial balloon passes through the patient’s vocal cords, the stylet is pulled back and the tube is rotated 90 degrees to the bronchial side being intubated. The tube is then advanced until resistance is felt or approximately 29cm at the teeth and the tracheal cuff is inflated. Breath sounds are checked, and should be heard bilaterally. The bronchial cuff is then inflated. The process of confirmation now begins.

Fiber-optic Confirmation

Various techniques are available to determine proper placement of DLTs. The most common are clamping with auscultation, and direct visualization using a fiber-optic bronchoscope (FOB). While clamping and various other techniques are optional, visualization with a FOB is mandatory and must always be included.

When using a left-sided DLT, an appropriately sized bronchoscope should be introduced into the tracheal lumen and advanced to the end of the tube. Upon exiting the tracheal lumen, the carina should be visualized and the upper portion of the bronchial (blue) balloon seen on the left. If too much air is introduced into the bronchial balloon, it may herniate over the carina to the other bronchus, partially occluding air-flow. Usually 2-3cc of air is sufficient for the bronchial balloon. It is also recommended to advance the FOB into the bronchial lumen and visualize the left upper lobe.

When a right-sided DLT is indicated, the carina should again be visualized through the tracheal lumen as for a left-sided DLT, but when the bronchoscope is passed down the bronchial side, the right upper lobe needs to be identified by exiting out the ventilation slot just before the distal end of the bronchial side. No matter how well the DLT has been secured, all are prone to movement, especially after your patient has been turned into the lateral position. The DLT should be rechecked with a FOB anytime the patient or DLT has been moved.

Clamp and Listen

The anesthesia provider will often clamp one side of the Y connector while listening to the breath sounds.

For a left-sided DLT, clamping the bronchial lumen should yield breath sounds on the right side only. Clamping the tracheal lumen should yield breath sounds on the left side only.

For a right-sided DLT, clamping the bronchial lumen should yield breath sounds on the left side only. Clamping the tracheal lumen should yield breath sounds on the right side only — be sure to listen for breath sounds over the right upper lobe.

If neither lumen is clamped breath sounds should be heard bilaterally.

Troubleshooting

Most placement problems with a DLT can be summed up into four categories:

1. The bronchial cuff is not inflated or is over-inflated — This can result in bilateral breath sounds being heard when either lumen is clamped. (The cuff is not sealing the bronchus, allowing air to pass around it.)

2. It’s in too far — If the DLT is pushed too far into either the left or right mainstem bronchus, the tracheal and bronchial lumens will both ventilate the same lung. The result is that the opposite side will be under-ventilated or not ventilated at all.

Solution: The FOB should be placed down the tracheal lumen and the cuffs deflated. The DLT should be withdrawn until the tracheal orifice is just above the level of the carina and the bronchial...
chial cuff visualized on the desired side. The cuffs are then re-inflated and the patient checked for bilateral breath sounds.

(3) It’s not in far enough — The bronchial lumen is above the carina. Bilateral breath sounds are heard when ventilating through the bronchial lumen, but no breath sounds are heard when ventilating through the tracheal lumen. The bronchial cuff is occluding the trachea and air from the tracheal opening cannot pass by into the lungs.

Solution: The FOB should be advanced to the end of the bronchial lumen and the carina visualized, the cuffs are then deflated. The FOB should be advanced into the desired bronchus, and the DLT advance while being careful to not damage the FOB. The cuffs are then re-inflated and the patient checked for bilateral breath sounds. The DLT should then be rechecked for proper placement through the tracheal lumen.

(4) It’s down the wrong side — In the case of a left-sided DLT, when clamping the bronchial side, the right lung will not raise and will have no breath sounds when auscultating. When clamping the tracheal side, the left lung will not raise and will have poor breath sounds when auscultating. This poses a problem for the right upper lobe. If incorrectly placed, a left-sided DLT in the right bronchus will not properly ventilate the right upper lobe like a right-sided DLT would.

Solution: Advance the FOB down the bronchial lumen and deflate the cuffs. Pull the DLT back until carina is visualized. Advance the FOB into the desired bronchus and then advance the DLT being careful to not damage the FOB. The cuffs are then re-inflated and the patient checked for bilateral breath sounds. The DLT should then be re-checked for proper placement through the tracheal lumen.

In Conclusion

A skilled anesthesia provider can make the placement of a DLT look very easy. The reality is that placement of a DLT requires a dexterous hand, knowledge of respiratory anatomy and the ability to use a variety of techniques to determine correct placement. The anesthesia technician knowledgeable in these techniques is a valuable asset to any anesthesia provider.

Resources


Fee, M.D., Michael P., personal interview, 26 Oct. 2006.
New & Refurbished Anesthesia Equipment

New Philips VM6
$6,786

New Philips MP5/G5 agent ID
$13,900

New PM8000
$3,650

New PM9000, w/EtCO2/agent ID
$5,650 w/EtCO2

$10,900

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Sweatshirt: Chocolate brown with cream-colored ASATT logo embroidered on left chest
☐ M ☐ L ☐ XL ☐ XXL $25.00 $___________

Fleece jacket with full zipper and two side-pockets:
Chocolate brown with cream-colored ASATT logo embroidered on left chest
☐ M ☐ L ☐ XL ☐ XXL $40.00 $___________

Tank-top: Royal blue with light blue ASATT logo embroidered on front
☐ M ☐ L ☐ XL ☐ XXL $15.00 $___________

Polo shirt: Pacific blue with navy ASATT logo embroidered on left chest
☐ M ☐ L ☐ XL ☐ XXL $30.00 $___________

Baseball-style cap: Brown washed denim look with cream-colored ASATT logo embroidered on front; one size, adjustable.
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Cer.A.T. Patch
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Cer.A.T. Pin
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SUBTOTAL $___________

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INSTRUCTIONS

1. Please type or carefully print the information requested exactly as it should appear on the conference roster and participant's name badge. If participant uses a nickname, please indicate how it should appear on the name badge.

2. Send completed form and fees payable by check in U.S. funds to ASATT, 7044 South 13th Street, Oak Creek, WI 53154-1429. Conference registration fees must be payable to ASATT. Payment must be received by September 12, 2007 to qualify for early registration. Full refunds will be granted for cancellations received prior to September 19th. Cancellations received after that date will be subject to a 30% penalty. No refunds after October 1, 2007; no exceptions. Registration fees cover conference functions and do not include accommodation payment.

Name_______________________________________ ASATT Membership No. _______________ Phone ____________________
Home Address_______________________________ E-Mail ________________________________
City________________________________________ State/Province_________ ZIP/Postal Code ________________
Employer/Affiliate___________________________ Designations ____________________________
Nickname/Badge Name________________________ Special Needs _____________________________

SCHEDULE OF CONFERENCE FEES

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Total Fees Enclosed (U.S. Funds) ____________

Member, Non-Member, Student and Daily Conference registration fee includes registration, materials, breakfasts, seminars, coffee breaks, receptions, ASATT and ASA Exhibit programs and recording of continuing education contact hours.

Spouse/Guest registration fee includes receptions, continental breakfasts and ASATT Exhibit program.

PLEASE INDICATE PAYMENT METHOD

☐ Check enclosed in amount of $___________ (in U.S. funds)  ☐ MasterCard  ☐ Visa
Card Number_________________________________________ Expiration Date____________________
Name on Card __________________________________________
Signature _____________________________________________
Card Billing Address ___________________________________

ASATT ♦ 7044 South 13th Street ♦ Oak Creek, WI 53154-1429 ♦ (414) 908-4942 ext. 450
Registration
The conference begins on Thursday, October 11 with registration for members, non-members, and guests. Badges must be worn at all conference functions.

Online Registration
Will be available at www.asatt.org in late July.

Faxed Registration
Faxed registrations will be accepted, provided a copy of your check request or your credit card information accompanies the conference registration form. The original registration form and check or payment information must be received by September 12 for early registration or after that date or on-site for late registration.

Cancellation Policy
Cancellations received before September 19 will be entitled to a full refund. Cancellations received after that date will be subject to a 30 percent penalty. No refunds will be made after October 1. NO EXCEPTIONS.

Welcome Reception
The Welcome Reception/Exhibits with cash bar on Thursday, October 11 is open to conference attendees, exhibitors, speakers, and their registered spouse/guest. Use this opportunity to network with your peers from around the country.

Certified Anesthesia Technician/Technologist
Credit for attending this conference applies toward the recertification of the Cer.A.T. and Cer.A.T.T. designations sponsored by ASATT. No certificates will be issued unless requested. Contact hours for ASATT members will be recorded in our database.

Hotel Accommodations
The Annual Conference will be held at Fisherman’s Wharf, 555 North Point Street, San Francisco, CA 94133. You may reserve your room by calling 888/421-1442 and asking for the American Society of Anesthesia Technologists and Technicians’ special rate. Please make your reservations no later than September 16 to receive the conference rate of $189/night for single or double, $214/night for triple, and $239 for quadruple, plus taxes.

Transportation To/From Hotel
To/From San Francisco Airport
Lorrie’s Shuttle — Reservations can be arranged through the hotel concierge, or by calling 415/334-9000. Cost: $15 per person to the hotel, $14 per person to the airport. These vans are not wheelchair accessible.

Super Shuttle — Reservations can be arranged through the hotel concierge, or by calling 800/258-3826. Cost: $15 per person, each way.

To/From Oakland Airport
Super Shuttle — Reservations required 24 hours in advance. Please call 800/258-3826. Cost: $25 per person, each way.

Taxi — Ride is about 40 minutes. Cost: about $55.

Airline Information
San Francisco is served by two major airports: San Francisco International Airport and Oakland Airport. Both airports are served by all major airlines. Check for special deals to San Francisco on websites like www.orbitz.com or www.expedia.com. It is recommended that you take the shuttle from the airport to the hotel.

Getting Around San Francisco
Muni: One-day pass for the buses and F-Train $11; three-day pass $18; seven-day pass $24. Transfers: $1.50 and are valid for 90 minutes. Cable Car: $5 per person, one-way. Cable car stop is directly across the street from the hotel. Check out the official San Francisco Visitors’ Site at www.onlyinsanfrancisco.com to plan ahead for your free time.

Continuing Education Credits
This conference will provide a continuing education forum to promote professional competence and knowledge of current technology that will enhance the skills of anesthesia technologists and technicians. Up to twelve CEs are being offered at this educational conference.

Weather/Dress
High temperature in October averages 70° with nighttime lows around 55°. Plan to dress in layers (and don’t forget to buy a fleece jacket with the ASATT logo, at the meeting!)
Hello and greetings, Region 1. I hope you all had a great spring and enjoyed the aromas of spring, new flowers blossoming and fresh mown grass. We finally have hot weather in the northeast. Region 1 is pretty quiet at this time. I hope that most of you have a vacation planned for this summer and have activities planned to keep you and your families busy enjoying the summer heat such as boating, camping and fishing just to name a few that come to mind. On April 21st the Maine Medical Center in Portland was the host of the Region 1 Educational Seminar. The seminar provided eight CEs and we had 51 technicians in attendance. I’d like to thank the following people who graciously gave their time in preparing and presenting topics for this seminar: Dr. Jim Phillips; Dr. Richard Evans; Jim Decourcey, D.O.; John Frazier, RN, RRT; James M. Maguire, Ph.D.; Paul Soule; Pat Bendall; Pat Salinas, CVAT; and Kathleen Hill, CVAT.

Their topics were both educational to new technicians, and provided a refresher course for seasoned technicians. I would also like to remind those technicians that certificates of attendance/CEs will only be mailed out if you requested one. Otherwise, the CEs will be entered into the database for those technicians who are ASATT members in good standing. If you requested a certificate and did not receive one, please let me know immediately. I would also like to thank all of the vendors who helped support the Region 1 meeting this year. We had a large turnout with over 25 companies in attendance. Region 1 would like to give a special thanks to Kevin Burk, Draeger Medical; Marthy Horne, Abbott Labs; Matt Dulac, Organon Pharmaceuticals; and Lee Baker and John Frazier, Edwards Life Sciences.

A reminder to all Region 1 members: Election time is just around the corner! Please be active in voting ... your vote is important! Also please take a moment to nominate a fellow Region 1 member for the educational award for 2007. The individual must have a direct impact on educating anesthesia technicians. Please send the information to ASATT headquarters. It is not too early to start planning for this year’s Annual Meeting in San Francisco. It will be an excellent learning opportunity and a great way to network with other technicians across the country. Let's have a great attendance like our past years!!

The warmer weather has arrived and so has the time for yard work and vacations. Please be safe and enjoy your summer! We had a great Regional meeting, May 5-6, held in Pittsburgh. Charlene Costanza and the group at Western Penn Hospital did an outstanding job as hosts. On Saturday, May 5th, we had 41 registered participants and 38 on Sunday, May 6th. The speakers selected were top notch and the subject matter was very informative. Char is already planning for another meeting next April so look for more information to come. I have received two nominations for the Regional Education Award so far. Is there a tech, physician, medical facility or vendor in your area that deserves recognition? Please get your nominations in to me soon so that a selection can be made. I also am still looking for someone in the Western part of our Region to contact me about hosting a Regional meeting in that area (Indiana, Michigan, Western/Southern Ohio, West Virginia). We are approaching summer so it may not happen until late fall or in the spring, but proper prior planning is essential. Also, please keep in mind that our Annual Educational Meeting is being held in San Francisco in October. This is an opportunity for all techs, certified or not, to meet and network with others, and obtain needed continuing education credits. If anyone is having difficulty with their organization’s getting approval, please contact me...
so that I may give any input that may assist in your getting approval for the education leave. Nothing is guaranteed, but additional input never hurts. In closing, I hope everyone has a safe and enjoyable summer. I will be in North Dakota and Minnesota for the first two weeks of July but will be checking my e-mail for any requests or comments.

REGION 3
Director: Darlene Bolick, Cer.A.T.
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E-mail: dbolick@hotmail.com

Happy summer to everyone in Region 3! I hope your spring has been a good one.

Congratulations to the 11 people from Region 3 who passed the certification exam in December, January and February! Mark Cotti, Jason Addison, Gerald Campbell, Joshua French, Uriel Abreu, Matthew Chandler, Eric Tokos, and Phillip Laye are officially Certified Anesthesia Technicians.

Sue Christian, Angela Jenkins, and Lynn Preston are now Certified Anesthesia Technologists. Way to go!

ASATT has a new management company! Technical Enterprises, Inc. (TEI) began taking over our daily operations on May 1, 2007. Please use this new company for all of your ASATT functions. We believe that this new endeavor will prove beneficial to the continued growth of our organization. Please be patient with us during this transition and feel free to contact me if you run into any problems.

You have several decisions to make this summer. Number one is, are you going to the ASATT Annual Meeting in San Francisco, October 11-14? If so, be sure to make your reservations early at the Hyatt at Fisherman’s Wharf. This year will be better than ever, with a great line-up of speakers and sponsors.

Secondly, have you thought of a person, facility or company who deserves to be recognized for their continued efforts in sponsoring, promoting and furthering educational programs? Think hard, and make your nominations for the Regional Education Award before the deadline on July 31, 2007. This award will be presented at the ASATT Annual Meeting in San Francisco.

Your last big decision for the summer pertains to voting. You will be receiving your ballots in the mail in mid-July. Be sure to read all the instructions first, and then mark your ballots correctly by voting only for your Region’s director position, along with the president-elect, secretary, and treasurer positions. Any ballot marked incorrectly cannot be counted.

Are you making plans for vacation? Be sure to take time to kick back and relax a little bit this summer. Sit on the beach and watch the waves, or take a trip to the mountains and go hiking. Whatever you choose, make sure you take lots of time for yourself and your family.

Have a happy and safe summer, and I look forward to seeing you in San Francisco this October!

REGION 4
IL–IA–MN–MO–ND–SD–WI
Director: Mary McGavock, LPN, Cer.A.T.
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E-mail: njmotola@aol.com

Well, the Windy City put on its best dress for the Region 4 Spring Meeting on April 28th. Warm weather, sunny skies, tulips in full bloom, trees flowering, and on and on. Quite unlike the weather we saw for the Annual Meeting last October!

The city wasn’t the only welcoming thing. University of Chicago Hospital was a fabulous host. Susan Ourada planned and executed a spectacular meeting. The speakers were wonderful, full of great information, and presented so well. I was so impressed that several of the speakers had taken the time to find out what we in ASATT are all about. They talked about our website, the survey, they showed such passion for what we as techs do. I was truly impressed. The topics were carefully chosen, and the evaluations showed that they kept everyone’s interest. And what a beautiful campus! The meeting room was set up to fit our needs. I need to mention the vendor support ... without them, we could not put on a meeting of this magnitude: LMA North America, Aspect Medical, King Systems, Arizant, Doctors Oxygen Service, Abbott, Richards Medical, Organon, ConMed, Arrow International, GE Healthcare, Olympus, Smiths Medical, and Tyco Healthcare.

As I do my self-evaluation of this meeting, I find one thing that concerns me greatly: How do I top this meeting next year? I truly don’t know if this meeting can be topped, BUT, I will surely try. Susan put so much time and effort into this meeting, I have learned a few things from her this year, and I will try and put them to good use as I start my plans for 2008. I am moving ahead with Southeast Wisconsin for 2008.

continued, page 16
I hope many of you reading this are making plans to attend the Annual Meeting in San Francisco this October. This is a great city to have a meeting ... so many fun things to do!

To all of Region 4: Try to grab a few extra fun times before summer of 2007 comes to an end. Remember you need balance in your life. All work and no play does not make a happy and healthy tech.

Order your ASATT logo items. Remember in Chicago how nice the fleece jackets were? I am sure they will come in handy, along with the sweatshirts for San Francisco in October.

Take a look on the website for ordering information. Take care and be safe!

REGION 5
Director: Josephine Trinidad, LVN, Cer.A.T.
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E-mail: josimatrin@yahoo.com

Happy Summer everyone! The Annual Region 5 Meeting will be held in Grand Junction, Colorado, on July 21st. Program and registration forms have been mailed and will also be posted on our website for further details. Hope to see a good number of attendees from all the states of Region 5. I will be looking forward to your attendance.

My time as your Region 5 Director is coming to an end in October. You should be receiving the official election ballot for the ASATT Board of Director nominations. Please take the time to participate with the election and make your vote count!

This is a very important issue, which I ask all of you not to take lightly. I need submission of candidate names for the Regional Education Award! Sadly, Region 5 did not award anyone last year. I am sure there is a member whom you feel is deserving of this honor for his or her contribution and support to the education of Anesthesia Technologists and Technicians. It is your turn to reciprocate; give this member the merit he/she deserves!

The brochure for our Annual Meeting in San Francisco in October will be mailed out in early July. If you are planning to attend, send in your forms, and make your reservations just as soon as you can. With the growing number of attendees each year, you don’t want to hear these two words: “Sold Out!”

Last but not least. I want to remind you, YOU are ASATT! You helped build a strong foundation. Now it is time to help build the columns to heighten our profession. We as members of ASATT organization can and will build a future that will earn respect and recognition. Get certified and maintain your certification! Certification is becoming a requirement in more hospitals and other healthcare entities nationwide. Your future is in your hands, You are ASATT!

Be the best, stay abreast, keep on learning!

REGION 6
AZ–CA–NM–NV–UT
Interim Director: Victoria Reyes, Cer.A.T.
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E-mail: victoria.a.reyes@kp.org

In April, a meeting was held in La Jolla, near San Diego, at Scripps Hospital, titled “Contemporary Issues in Anesthesia.” There were a variety of topics pertinent to Anesthesia Technicians and Critical Care Nursing. Maretta was a speaker and discussed the importance of certification for anesthesia technical personnel. Anesthesia technicians attended in higher numbers than last year’s event ... I hope this continues to be a trend!

In May, Region 6 held a meeting at the Edwards Life sciences Corporate Office in Irvine, CA. I was happy to see how many ASATT members and non-members were able to attend, considering it was a Friday. John Frazier led the program with an overview of Anatomy & Physiology, Pressure Monitoring, CVP and Swan Ganz. After that there were “hands-on” workstations for opportunities to “float a central line, best practice techniques, etc.” Then the group was taken on a tour of the facility, which included hand-assembly of catheters, porcine valve work area, and their museum, which had in-depth displays of their history, advances in technology and future developments. Each attendee was given a pocket-sized Quick Guide to Cardiopulmonary Care. The response was so great from both sides that we will plan to do this meeting again in the future.

I am also happy to report that Region 6 members have come through again and volunteered their facilities for future Region 6 meetings! I am beginning to plan those now and will keep everyone posted as plans finalize. I want to thank everyone who has volunteered to help with meetings, whether it ended up at their facility or not, isn't as important as the fact that so many are willing and anxious to help further the success of all ASATT members and anesthesia technical personnel.

I also had the pleasure of meeting students of the Grossmont College anesthesia technology program. They requested I speak to the class on “Being an Anesthesia Technician” and the importance of joining ASATT. They were very attentive and had many questions. I am sure we will be hearing from many of them in the future, with ASATT.

Life is made up of 10% of what happens to you and 90% of how you react to it. Earn your success based on service to others. We need to care and show respect for others and we need to practice this daily.

Calling all Cer.A.T.T.s and Cer.A.T.s!!

We would love to have MORE articles for THE SENSOR — especially Science & Technology articles — submitted by the capable members of ASATT. See your words in print! Contact Maretta for details: MaRaticus@bresnan.net.
Be sure to put your requests in for the Annual Educational Meeting in October. We will also have a short Region 6 meeting while in San Francisco. Please let me know if there are any specific topics you would like to address while at this meeting.

"Til next time!

REGION 7
Director: Delbert Macanas, Sr., Cer. A.T.
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E-mail: d.macanas@kuakini.org

Howzit Region 7!!
We have a meeting coming up in Honolulu on Sunday, August 12th, at the Hilton Waikiki Prince Hotel. We have some rooms available for reservation at meeting rates. The hotel is located two blocks from beautiful Waikiki Beach, but away from the noise of Waikiki. The hotel has just finished renovating all of the rooms and some of the exterior. Those who elect to stay at the hotel will enjoy its beauty.

As more details become available, I will have them posted on the website. I can always use any help that you may be able to provide to help me at the meeting. Let me know, ASAP, if you are able to provide a topic for the lectures, secure a speaker, a vendor or sponsor, or are willing to just help. I hope to see many of you at the meeting.

The Annual Meeting in San Francisco is right around the corner and it's not too late to make plans to attend. Since 1994, I have missed just one of the Annual Meetings and I have yet to be disappointed with the content of the meeting. I have always returned to work with additional knowledge, contact hours for recertification, and best of all you get to meet and network with other Anesthesia Technicians worldwide. This meeting is as close to our Region as it will get. The next two years, the meeting will go east and return to the west coast in 2010. The 2010 meeting will be in San Diego; this will be an opportunity to attend the meeting at reasonable cost. As icing on the cake, you will get to visit another beautiful city with great food and sites to see.

Don't forget to vote: it is time once again to elect or re-elect your Regional director, treasurer, secretary, and president elect. Official ballots will be mailed out in July.

Educational Award: We are still looking for nominations for the award. Remember the person, group, or company that has gone above and beyond the call to help educate anesthesia technicians in our Region should be nominated. Helping educate anesthesia technicians is a thankless job, but it must be done and the people doing it need to be recognized for their efforts. Let me tell you, it is not easy to accomplish everything associated with educating anesthesia technicians. The deadline for nominations is July 31st.

Membership Dues: Remember to pay your membership dues; reminders were mailed out in June. Send payment ASAP. Current members enjoy many great benefits. Especially, discounts on all ASATT sponsored meetings.

Aloha! ☀️

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Recent PIAA study found that the average indemnity payment for Anesthesia-related dental injury averages a staggering $10,000 per claim.
Chris Dunn, R.R.T., Cer.A.T.

What is your current position?
Registered Respiratory Therapist and Certified Anesthesia Technician at the Nebraska Medical Center.

How many years have you been in the anesthesia field?
Fourteen years.

What do you find the most challenging about your job?
When a new group of anesthesiology residents starts their training every July.

What secret vice can you confess?
Late night eating.

What has been your proudest accomplishment so far in life?
Having a wonderful marriage and raising three great kids.

You've just won your dream vacation. Where would you go?
I’ve always wanted to visit Ireland and chat with the locals, in some small pub, while drinking a pint of Guinness.

What is your favorite food?
New York strip (medium rare).

People would be very surprised to know that:
A nurse and I delivered my second child.

If a magic genie could grant you one wish, what would it be?
Health and longevity. (If I say it fast, does it count as only one wish?)

It your day off: What do you enjoy doing with your time?
Going to the lake and fishing with my kids.

What is your favorite movie?
The Hunt for Red October.

What is your favorite type of music?
Classic guitar rock.

What would you like to get around to doing one of these days?
Riding all of the great roller-coasters around the world.

What goals, expectations or changes do you foresee being accomplished by ASATT?
I see the ASATT as being a continuous source of higher education, making us valuable team members and highly sought-after professionals.

MEMBERS PASSING THEIR CERTIFICATION EXAMS

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Accidentally left off the December 2006 list — Constance Sugrue, Cer.A.T. ..........Region 1

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To test your knowledge on the Science and Technology article that begins on page 6, provide correct answers to the following questions on the form below. Submissions for this issue’s Quiz expire June 1, 2010. Follow the instructions on that form to earn one (1) Continuing Education credit.

1. Your department wants to stock a 26Fr DLT for smaller patients. This size DLT is:
   A. Not available
   B. Available from Mallinckrodt
   C. Available from Rüsch
   D. Available from Sheridan
   E. Available from all three vendors

2. When confirming the DLT position with the fiber-optic bronchoscope, the carina is visualized when:
   A. The bronchoscope exits the bronchial lumen
   B. The bronchoscope exits the tracheal lumen

3. When the tracheal cuff is inflated and neither lumen is clamped, the DLT ventilates both lungs.
   □ T □ F

4. A patient scheduled for a thoracotomy has a DLT inserted. After turning the patient into the lateral position, the position of the DLT should be rechecked with the fiber-optic bronchoscope.
   □ T □ F

5. In general, for most adult patients, what range of DLT is appropriate?
   A. 26 to 32
   B. 32 to 35
   C. 37 to 39
   D. 39 to 41

To apply for Continuing Education/Contact Hours:

(1) Provide all the information requested on this form.
(2) Provide the correct answers to this issue’s quiz in the box (right)
(3) Mail this form along with $5.00 (check or money order, payable to ASATT) to:

   ASATT
   7044 South 13th Street
   Oak Creek, WI 53154-1429

Name ___________________________________________ ASATT Number ___________________________
Street Address __________________________________ Phone ____________________________
City ___________________________ State ________ ZIP Code _______________________
Signature __________________________________________________________________________ Date __________
Greetings, Sensor readers!!

I'd like to first say thanks to all of you who sent in your Anesthesia Tech Day digital images. It was a lot of fun seeing your departments, and all your smiling faces during your Anesthesia Tech Day celebrations. It's obvious that you are very appreciated by your CRNAs and MDs.

As mentioned in “From the Editor's Desk” on page 4 in the Winter 2007 edition (www.asatt.org/members/sensorarchives/Sensor20071Winter.pdf), Maggie Arnold of Aspect Medical (Home of the BIS Vista) accepted my invitation to partner with The Sensor to sponsor another Photo Contest.

Maggie understands and appreciates the role of the Anesthesia Tech, and how that position supports her effectiveness within her accounts in North Carolina, Virginia and West Virginia.

One entry for each picture submitted was assembled and carefully thrown into a secure cardboard box, which was then placed into a locked vault and guarded 24/7 by Catawba Valley Medical Center’s “Finest” with their video and sonic surveillance until late May, when Maggie came to Hickory, NC and drew the lucky winner. The results were then sealed in an envelope during The Sensor’s production and printing process, until now...

May I have the envelope, please! (drum roll........)

Congratulations, Shaleha Khalique, Cer.A.T., and Faith Nimer, Cer.A.T., from Stony Brook University Medical Center of Stony Brook, NY. You are our Photo Contest winners and have won a $50 Visa gift card from your friends at Aspect Medical and The Sensor.

Shaleha, Faith, and the Anesthesia Techs at Stony Brook mentioned that they would like to salute Dr. Maria Lagade, Anesthesia Technology Program Director at Stony Brook, for her direction, support and friendship. Congratulations, Maria!

Until next time: Be good, be kind, and be careful ... happy trails!

Lynn Preston, Cer.A.T.T.
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