**KING AIRWAY PROCEDURE**

**Indications**
- When ventilation cannot be adequately maintained by BLS techniques, intubation is anticipated to be difficult, or intubation is unsuccessful after one attempt

**Pre-procedure**
- Open airway and pre-oxygenate with BVM for 1-3 min with 100% O2. Avoid hyperventilation in cardiac arrest
- Test cuff according to manufacturer’s instructions
- Apply water soluble lubricant to distal end of the tube
- Position the head into the “sniffing” position or neutral position if trauma is suspected
- Remove dentures before placing tube to prevent laceration of the cuffs

**Procedure**
- Without exerting excessive force, advance tube until base of connector is aligned with teeth or gums
- Inflate cuffs based on size of tube
- Attach bag-valve to King Airway
- If necessary, withdraw airway until ventilation is easy and free flowing the
- Verify placement using all of the following
  - Rise and fall of chest
  - Bilateral breath sounds
  - Capnometry/capnography or colorimetric device
- Secure the tube with tape or commercial tube holder, noting depth marking on tube

**Equipment**
- King Airway
- Syringe
- Water soluble lubricant
- Portable suction device
- Capnometry/capnography or Colorimetric device
- Stethoscope

**King Tube Sizing**

<table>
<thead>
<tr>
<th>Size</th>
<th>Patient Criteria</th>
<th>Color</th>
<th>Inflation Volume</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>4-5ft</td>
<td>Yellow</td>
<td>45-60ml</td>
</tr>
<tr>
<td>4</td>
<td>5-6ft</td>
<td>Red</td>
<td>60-80ml</td>
</tr>
<tr>
<td>5</td>
<td>&gt;6ft</td>
<td>Purple</td>
<td>70-90ml</td>
</tr>
</tbody>
</table>

**Critical Information**
- Contraindications:
  - Responsive patient with an intact gag reflex
  - Patient with known esophageal disease
  - Patients who have ingested caustic substances
  - Tracheal stoma
  - Patient fits on length based resuscitation tape

**SPECIAL CONSIDERATIONS**
- If there is any doubt about the proper placement of the King Airway, deflate the cuffs and remove device; ventilate the patient with BVM for 30 seconds and repeat sequence of steps
- If unsuccessful on second attempt, resume BLS airway management