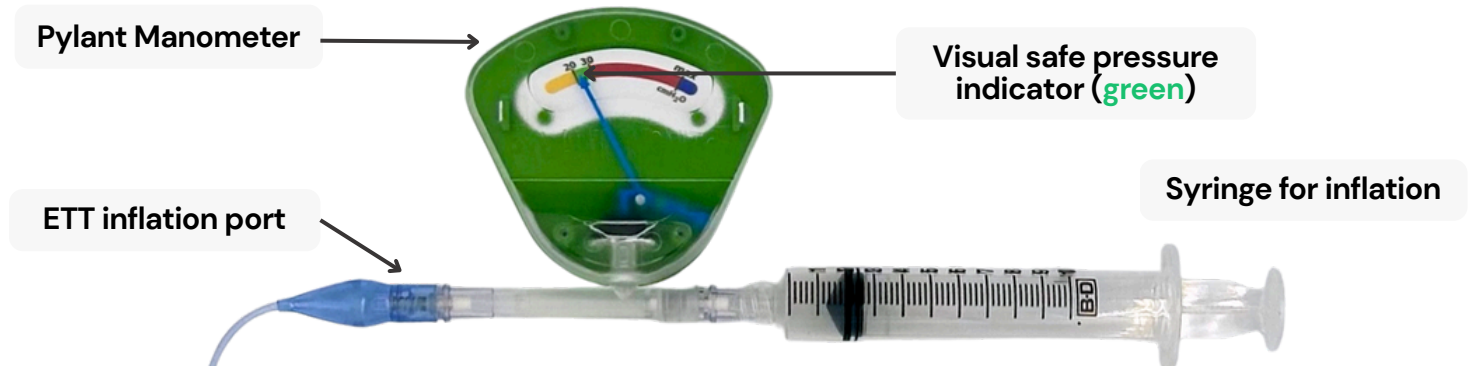


PR53: Endotracheal Tube (ETT) Cuff Manometry



Procedure

Prior to use, assess for leak:

1. Attach syringe and cover the **patient-side port**.
2. Inject air and occlude for 3 seconds to maintain constant pressure.

Replace the manometer and repeat steps 1-2 if leak detected.

3. With the patient intubated, attach the manometer to the ETT cuff inflation port and inject air to achieve safe inflation pressure:

Adults: 25 cm H₂O

Pediatrics / Neonates: 20 cm H₂O

4. Assess for air leak around cuff, add air to ETT cuff cautiously:

Adults: should NOT exceed 30 cm H₂O

Pediatrics / Neonates: should **not** exceed 25 cm H₂O

5. Detach or keep manometer attached for reassessment as needed.

The single-use device can stay with the patient at the receiving facility or be disposed of after patient care is concluded.

✓ Indications

- Endotracheal tube in situ

✗ Contraindications

- No absolute contraindications

? Complications

- ETT cuff over-inflation, resulting in necrosis, tracheal stenosis, and ulceration
- ETT cuff under-inflation, resulting in air leak, aspiration risk, and insufficient ventilation

! Precautions

- Best reserved for use outside of cardiac arrest
- Cuff pressure reassessment should be performed when a patient is exposed to large altitude changes during flight operations