



i-gel[®]

The supraglottic airway with a non-inflatable cuff



Airway Management ▪ Airway Devices



Quality, innovation and trust

Interact with us



www.intersurgicalinc.com



Airway management has evolved

Introducing the i-gel®: a revolutionary single use supraglottic airway from Intersurgical.



i-gel® and natural airway management

The i-gel® is a truly unique single use, latex and PVC free airway device, representing the culmination of years of extensive research and development. Everything about the i-gel® has been designed to work in perfect unison with the anatomy; the i-gel® design was inspired by the physiology of the perilaryngeal framework itself – airway management as nature might have intended.

i-gel® mirrors the anatomy

The shape, softness and contours accurately mirror the perilaryngeal anatomy to create the perfect fit. This innovative concept means that no cuff inflation is required. The i-gel® works in harmony with the patient's anatomy so that compression and displacement trauma are significantly reduced or eliminated.

The non-inflatable cuff

i-gel® gets its name from the soft gel-like material from which it is made. It is the innovative application of this material that has enabled the development of a unique non-inflatable cuff. This key feature means insertion of i-gel® is easy, rapid and consistently reliable.

The simple, safe and rapid solution

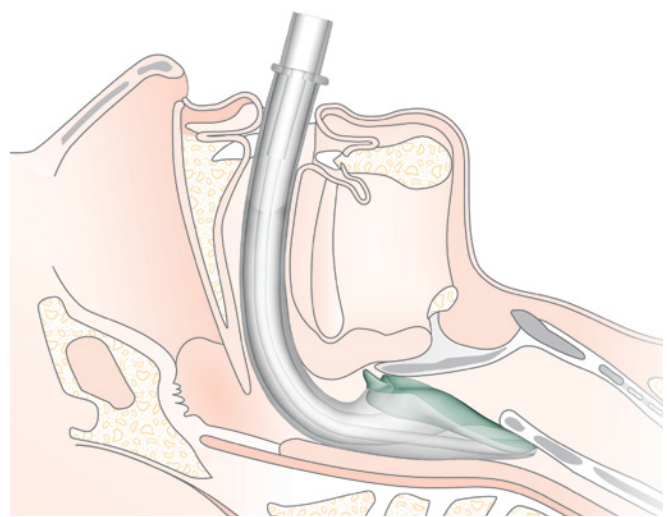
i-gel® is incredibly easy to use. A proficient user can achieve insertion of the i-gel® in less than 5 seconds. With no inflatable cuff, i-gel® provides a safe and rapid airway management solution.

Adults

Adult i-gel® is indicated for securing and maintaining a patient airway in routine and emergency anesthetics of fasted patients, during spontaneous or intermittent positive pressure ventilation (IPPV), during resuscitation of the unconscious patient, and as a conduit for intubation under fiberoptic guidance in a known or unexpectedly difficult intubation, by personnel who are suitably trained and experienced in the use of airway management techniques and devices.

Accurate and natural positioning

The i-gel® accurately and naturally positions itself over the laryngeal framework, providing a reliable perilaryngeal seal without the need for an inflatable cuff.



Pediatrics

i-gel® is available in four pediatric as well as three adult sizes, making it applicable for use with patients from 2kg to 90+kg. The pediatric i-gel® is indicated in securing and maintaining a patent airway in routine and emergency anesthetics for operations of fasted patients during spontaneous or intermittent positive pressure ventilation (IPPV) and during resuscitation of the unconscious patient, by personnel who are suitably trained and experienced in the use of airway management techniques and devices.

Additional information available

Further information regarding i-gel® including bibliographies, a clinical study database and product videos is available on the i-gel® website www.intersurgicalinc.com/info/igel.



Features and benefits

The i-gel® has a host of features that provide significant benefits to the patient and the clinician.

15mm connector

Reliable connection to any standard catheter mount or connection

Proximal end of gastric channel

Clearly displayed product information

For quick easy reference. Includes confirmation of size and weight guidance

Position guide (adult sizes only)

Easy confirmation of optimum insertion depth



Gastric channel

The i-gel® incorporates a gastric channel (except size 1). It provides an early warning of regurgitation, allows for the passing of a nasogastric tube to empty the stomach contents and facilitates venting

Integral bite block

Reduces the possibility of airway channel occlusion

Buccal cavities stabilizer

Aids insertion and eliminates the potential for rotation

Epiglottic rest

Reduces the possibility of epiglottic 'down folding' and airway obstruction

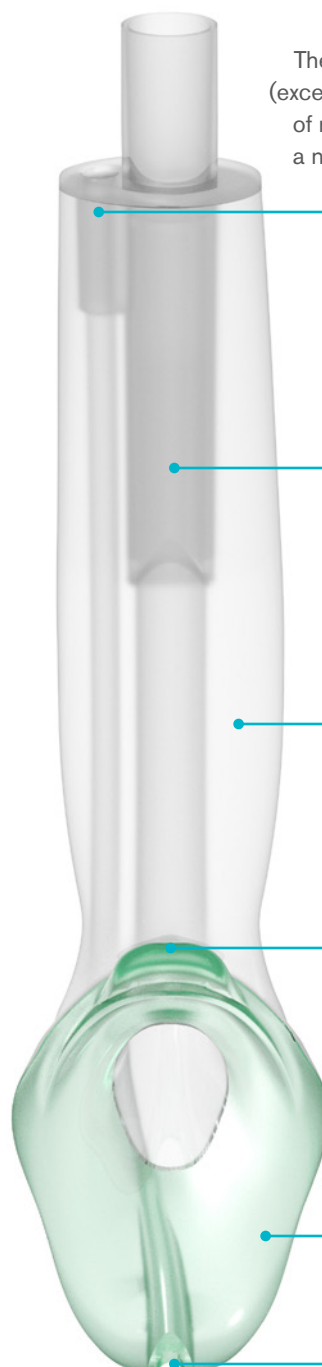
The non-inflatable cuff

Made from a unique soft gel-like material allowing ease of insertion and reduced trauma

Distal end of gastric channel



The adult sizes of i-gel® can be used as a conduit for intubation under fiberoptic guidance in a known or unexpectedly difficult intubation





Innovative packaging

The i-gel® supraglottic airway is supplied in a fully recyclable protective cradle or cage pack. This unique packaging protects the i-gel® in transit and ensures that it maintains its anatomical shape. i-gel® is available in seven sizes.



Code	Description	Color	Size	Weight	Box Qty.
8205000	i-gel®, supraglottic airway		5 Large adult	90+kg (200+lbs)	25 
8204000	i-gel®, supraglottic airway		4 Medium adult	50–90kg (110–200lbs)	25 
8203000	i-gel®, supraglottic airway		3 Small adult	30–60kg (65–130lbs)	25 
8225000	i-gel®, supraglottic airway		2.5 Large pediatric	25–35kg (55–77lbs)	10 
8202000	i-gel®, supraglottic airway		2 Small pediatric	10–25kg (22–55lbs)	10 
8215000	i-gel®, supraglottic airway		1.5 Infant	5–12kg (11–25lbs)	10 
8201000	i-gel®, supraglottic airway		1 Neonate	2–5kg (5–11lbs)	10 

[Make an inquiry](#)
[Find out more](#)
[Watch the video](#)


References

1. CD Deakin, JP Nolan, J Soar, K Sunde, RW Koster, GB Smith, GD Perkins. European Resuscitation Council Guidelines for Resuscitation 2010 Section 4. Adult advanced life support, Resuscitation 81, 1305-52
2. UK Resuscitation Council, Advanced Life Support Guide. 5th Ed., London: UK Resuscitation Council 2010
3. P Michalek, W Donaldson, L Theiler. The use of i-gel® in anaesthesia - Facts and fiction in 2013. Trends in Anaesthesia and Critical Care 2013 Oct; 3(5):246-251
4. L Theiler, M Gutzmann, M Kleine-Brueggene, N Urwyler, B Kaempfen, R Greif. i-gel® supraglottic airway in clinical practice: a prospective observational multicentre study. British Journal of Anaesthesia 2012 Dec; 109(6):990-5
5. M Kleine-Brueggene, L Theiler, N Urwyler, A Vogt, R Greif. Randomised trial comparing the i-gel® and Magill tracheal tube with the single-use ILMA® and ILMA® tracheal tube for fibre optic guided intubation in anaesthetised patients with a difficult airway. British Journal of Anaesthesia 2011 Aug; 107(2):251-7
6. D Haske, B Schempf, G Gaier, C Niederberger. Performance of the i-gel® during pre-hospital cardiopulmonary resuscitation. Resuscitation 2013 Sep; 84(9):1229-32
7. RM Beringer, F Kelly, TM Cook, J Nolan, R Hardy, T Simpson, MC White. A cohort evaluation of the paediatric i-gel® airway during anaesthesia in 120 children. Anaesthesia 2011 Dec; 66(12):1121-6
8. DA Gabbott, R Beringer. The i-gel® supraglottic airway: A potential role for resuscitation? Resuscitation 2007; 73(1): 161-2
9. P Michalek and W Donaldson (Edited by). The i-gel® supraglottic airway. Nova Science Publishers, 2013
10. RM Levitan, WC Kinkle. Initial anatomic investigations of the i-gel® airway: a novel supraglottic airway without inflatable cuff. Anaesthesia 2005; 60(10):1022-1026

U.S. Lit No. 44.14 / IS6.3 US • Issue 17.1 01.26



Intersurgical Inc, 2055 Executive Drive, Indianapolis, IN 46241, USA

T: 800-828-9633 F: 315-451-3696 support@intersurgicalinc.com www.intersurgicalinc.com

UK • Australia • Benelux • Brazil • Canada • China • Colombia • Czech Republic • Denmark • France • Germany • India • Ireland • Italy
Japan • Lithuania • Malaysia • Mexico • Norway • Philippines • Portugal • Russia • South Africa • Spain • Sweden • Taiwan • Turkey • USA