Cleaning Recommendations

Cleaning process should follow standard institution procedures.

- **On/Off Valve and High Pressure Hose Assembly**
  Wipe externally with disinfectant on a soft cloth.
  DO NOT autoclave, immerse in fluids, disassemble valve, use bleach, or sterilize.

- **Small Bore Tubing Assembly**
  Single Patient Use. Replace tubing between patients and if in-line filter becomes occluded during use.
  Dispose of Small Bore Tubing Assembly Tubing properly.
  *Always use retaining clamps when affixing tubing to fittings and/or connectors (see diagram in Panel E).

- **Gauge**
  DO NOT immerse gauge in any liquid.
  **Gauge Case**
  Wipe exterior of the gauge case with bactericidal or virucidal wipe.
  **Gauge Crystal**
  DO NOT use alcohol or a solution containing phenols on crystal. Gently wipe crystal with bactericidal or virucidal wipe.

Visit iiimedical.com/symbols.pdf for the Glossary of Symbols used in Instrumentation Industries, Inc. labeling.

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**BE 183-SU**
BE 183-SUR
BE 183-SUR-12

**Manual Jet Ventilator**

**Installation & Usage Directions**

**BE 183-SU**
BE 183-SUR
BE 183-SUR-12

Instrumentation Industries, Inc.

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- Not made with Natural Rubber Latex
- Not made with Di(2-ethylhexyl) phthalate (DEHP)

These user instructions are available in Canadian French at iiimedical.com
Ces instructions d'utilisation sont disponibles en français canadien à iiimedical.com

Made in USA!
**Indications for Use:**

The BE 183-SUR, BE 183-SUR-12, and BE 183-SU Manual Jet Ventilators are designed to provide transtracheal ventilation in specific emergency situations of upper airway obstructions. These systems are used in conjunction with a transtracheal catheter, or cricothyrotomy needle, which is inserted through the cricothyroid membrane.

Ventilation is accomplished by the manual, intermittent jetting of oxygen through the catheter for subsequent lung inflation.

**Contraindications:**

These devices are contraindicated for total airway obstruction because there is no means of exhalation. These devices are not intended for infant or neonatal use.

**Usage Cautions:**

- The BE 183-SU is designed to operate directly from a gas source pressure that does not exceed 50 psi.
- The BE 183-SUR & BE 183-SUR-12 (with gauge and regulator) are designed to allow adjustment of patient outlet pressure between 0-50 psi.
- These devices are contraindicated for total airway obstruction because there is no means of exhalation. These devices are not intended for infant or neonatal use.
- The BE 183-SU, BE 183-SUR and BE 183-SUR-12 Manual Jet Ventilators CANNOT be used during any type of Magnetic Resonance Imaging (MRI) as some parts of the assembly are magnetic.

**Replacement /Assembly Information:**

- **Replacing BE 183-G.**
  When replacing BE 183-G Gauge, ensure that Teflon tape is used on gauge threads to prevent leaks.
  - Use wrench on square gauge base.
  - Do not tighten using gauge face.
- **Assembling BE 183-R to BE 183-SU (If applicable)**
  When assembling BE 183-R to BE 183-SU, ensure that threaded connections are tightened securely.

**Manual Jet Ventilators**

**Manual Jet Ventilators** are manually-controlled oxygen delivery systems used for transtracheal ventilation.

**Directions for Use:**

The BE 183-SU, BE 183-SUR, and BE 183-SUR-12 must be used with a transtracheal catheter, or cricothyrotomy needle, which is inserted through the cricothyroid membrane.

1. Connect the DISS O2 Fitting on the High Pressure Hose Assembly to a high pressure oxygen source.
   - a. The BE 183-SU is designed to operate directly from a high pressure gas source that does not exceed 50 psi.
   - b. The BE 183-SUR & BE 183-SUR-12 (with gauge and regulator) are designed to allow adjustment of operating pressure between 0-50 psi.
      - It may be appropriate to start with a lower operating pressure for smaller patients and then increase the operating pressure, if necessary.

2. Place the Luer Lock end of the Small Bore Tubing in one hand and hold the On/Off Valve Plunger in the other.

3. Depress the On/Off Valve Plunger several times to ensure proper function of the device.

4. For the BE 183-SUR & BE 183-SUR-12, pull out the regulator knob and turn it until the gauge reads the desired pressure. Push the knob back in to “lock in” the pressure setting.

5. After the Transtracheal Catheter or Cricothyrotomy Needle has been inserted and secured, connect it to the Luer Lock end of the Small Bore Tubing.

6. Depress the On/Off Valve Plunger to initiate ventilation. Keep On/Off Valve Plunger depressed for as long as inspiration is desired.

7. Release the On/Off Valve Plunger to permit exhalation.
   - On/Off Valve Plunger must be depressed for each breath separately.

8. Ventilate the patient according to the department policy or as prescribed by the physician.
   - Listen for the sound of ventilation flow and closely watch the patient’s chest movements while ventilating the patient.

**Performance check for BE 183-SUR and BE 183-SUR-12 Manual Jet Ventilators**

The user of this device should verify proper operation by checking the regulator after each use or approximately every six months, whichever occurs the soonest.

To do so, dial the Regulator in to reach a gauge pressure of 50 psi. When the Gauge reading is steady, depress the On/Off Valve Plunger several times to open the line and to make sure that oxygen is flowing. Verify that the Gauge returns to 50 psi after the On/Off Valve Plunger is depressed and then released. Repeat at 40 psi, 30 psi, 20 psi, 10 psi and at 0 psi. When at 0, there should be no oxygen traveling through the unit.

- **Note:** When dialing in a new pressure setting (other than 0 psi), approach that setting in an increasing direction to avoid a hysteresis effect. For example, if decreasing the pressure setting from 50 psi to 40 psi, use the Regulator Knob to decrease the inlet pressure until the Gauge Needle reads 37-38 psi (at least 2 psi below the setting that you are targeting) and then slowly increase the pressure back up to 40 psi. If this procedure is followed and the source pressure is adequate, the gauge should return to within 2 psi of the targeted setting each time the On/Off Valve Plunger is depressed and then released.

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**A Manual Jet Ventilator Directions**

**BE 183-SU Manual Jet Ventilators** are designed to provide transtracheal ventilation in specific emergency situations of upper airway obstructions. These systems are used in conjunction with a transtracheal catheter, or cricothyrotomy needle, which is inserted through the cricothyroid membrane. **Manual Jet Ventilators** are manually-controlled oxygen delivery systems used for transtracheal ventilation.