

**Clinical Indications:**

- EMT/EMT-I: In an apneic and pulseless patient.
- EMT-P: May be used in the Adult Failed Airway protocol.
- Patient must be over 4 feet tall.

**Procedure:**

1. Pre-oxygenate the patient.
2. Lubricate the tube.
3. Grasp the patients tongue and jaw with your gloved hand and pull forward.
4. Gently insert the tube rotated laterally 45-90 degrees so that the blue orientation line is touching the corner of the mouth. Once the tip is at the base of the tongue rotate tube back to midline. Insert the airway until the base of the connector is in line with the teeth or gums.
5. Inflate the cuff per manufacturer's recommendations until a seal is obtained.
6. Ventilate the patient while gently withdrawing the airway until the patient is easily ventilated.
7. Auscultate for breath sounds and sounds over the epigastrium. Look for the chest to rise and fall.
8. If necessary, adjust cuff inflation pressure to maximize seal, each patient is different.
9. The large pharyngeal balloon may secure the device, use tape as needed.
9. Confirm tube placement using end-tidal CO2 detector.
10. If the King Airway is utilized for the Adult Failed Airway protocol, RSI medications shall be utilized to maintain an absent gag reflex.

Size 3	4-5 ft tall	50-60 cc of air
Size 4	5-6 ft tall	60-80 cc of air (most common)
Size 5	> 6 ft tall	70-90 cc of air

**Certification Requirements:**

Successfully complete a skill evaluation inclusive of the indications, contraindications, technique, and possible complications of the procedure at least once during the certification period.