



Montgomery County Fire and Rescue Service Division of Operations

Emergency Medical and Integrated Healthcare Services

Office of Medical Oversight Clinical Practice Guideline

Title:	Suspending Use of Pediatric Sized King LTS-D	Number:	2023 – 05																																							
Date:	November 10, 2023																																									
Issued by:	Roger M. Stone MD, MS – MCFRS Medical Director																																									
Purpose:	To provide clinical guidance for advanced airway management without pediatric sized King LTS-D devices																																									
Target Patient Population:	Patients less than 4 feet in height who require an advanced airway																																									
Guideline:	<p>Background</p> <p>The manufacturer has restricted the sale of King LTS-D sized 2.5 and below because these devices are not approved for use by the FDA. After consultation with pediatric resuscitation experts and out of an abundance of caution we are suspending the use of these sized airways. This will primarily impact the resuscitation for children younger than 7 years of age as the size 3 LTS-D is still available for a height range of 4-5 feet.</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th rowspan="2">Tube Size</th> <th colspan="4">Pediatric</th> <th colspan="3">Adult</th> </tr> <tr> <th>Size 0</th> <th>Size 1</th> <th>Size 2</th> <th>Size 2.5</th> <th>Size 3</th> <th>Size 4</th> <th>Size 5</th> </tr> </thead> <tbody> <tr> <td>Connector Color</td> <td>Transparent</td> <td>White</td> <td>Green</td> <td>Orange</td> <td>Yellow</td> <td>Red</td> <td>Purple</td> </tr> <tr> <td>Patient Criteria</td> <td><5 kg</td> <td>5-12 kg</td> <td>12-25 kg (90-115 cm)</td> <td>25-35 kg (105-130 cm)</td> <td>4-5 feet (122-155 cm)</td> <td>5-6 feet (155-180 cm)</td> <td>greater than 6 feet (>180 cm)</td> </tr> <tr> <td>Recommended Cuff Volume</td> <td>10 ml</td> <td>20 ml</td> <td>25 -35 ml</td> <td>30-40 ml</td> <td>40-55 ml</td> <td>50-70 ml</td> <td>60-80 ml</td> </tr> </tbody> </table> <ul style="list-style-type: none"> The best available evidence among pediatric cardiac arrest patients supports equivalent outcomes between intubation and BVM use. Maryland Medical Protocol prefers extraglottic airway placement over endotracheal intubation for pediatrics. Until there is FDA approval for the LTS-D or we transition to another device, endotracheal intubation is our only option for advanced airway placement. This CPG does not contradict CPG 2022-01, "Advanced Airway Management". <p>Procedure</p> <ul style="list-style-type: none"> Insert an appropriate airway adjunct and use BVM ventilation corresponding with the patient's immediate needs. Cardiac arrest patients must receive one intubation attempt. No patient should receive more than one intubation attempt. No intubation attempt may last longer than 60 seconds. Should intubation fail, continue ventilating with a BVM. When transporting a patient for whom intubation has failed, consider an additional clinician specifically to maintain an effective two-person ventilation technique. <p>Questions may be directed to any assigned EMS Duty Officer.</p>			Tube Size	Pediatric				Adult			Size 0	Size 1	Size 2	Size 2.5	Size 3	Size 4	Size 5	Connector Color	Transparent	White	Green	Orange	Yellow	Red	Purple	Patient Criteria	<5 kg	5-12 kg	12-25 kg (90-115 cm)	25-35 kg (105-130 cm)	4-5 feet (122-155 cm)	5-6 feet (155-180 cm)	greater than 6 feet (>180 cm)	Recommended Cuff Volume	10 ml	20 ml	25 -35 ml	30-40 ml	40-55 ml	50-70 ml	60-80 ml
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