

# Ambu® aScope™ 3 Regular 5.0/2.2

The single-use flexible scope



## Key Benefits

- **Instant availability**  
Always at hand when needed, saving valuable time and enhancing patient safety.
- **High degree of usability**  
The portable, plug and play system is easy to transport and set up. It is ready for use in no time.
- **Cost effective**  
Reduced costs due to low capital investment, no reprocessing or repair costs and higher workflow efficiency.
- **No risk of cross-contamination**  
Sterility straight from the pack minimizes the risk of cross-contamination.

## Ambu® aScope™ 3 Regular 5.0/2.2

### Availability of bronchoscopes is a general problem

Insufficient availability of equipment for management of the difficult airway in the OR, ER and ICU was considered among the major causative factors contributing to poor patient outcomes in the NAP4 Audit<sup>1</sup> conducted in the UK. In the ICU, prompt access to a flexible optical scope for airway management was a recurrent problem<sup>1</sup>.

### Intubation and bronchoscopy made easy – in the OR, ER and ICU

aScope 3 Regular is a flexible single-use scope that once and for all solves the problem of accessibility, simplifies set-up procedures and eliminates the need for complex cleaning procedures, thus releasing valuable resources for other procedures.

With a channel width of up to 2.2 mm, aScope 3 Regular is the ideal alternative to reusable scopes. It is suitable for a wide range of bronchoscopy procedures: from intubation and training of intubation skills in the OR and ER to bedside BAL & PDT procedures in the ICU.

When connected to the portable monitor, Ambu® aView™, a high-resolution image enables easy navigation and fast identification of anatomical landmarks.

### Enabling you to provide the best care

By switching to the single-use aScope 3 Regular, you enhance patient safety by ensuring immediate access to a flexible scope and minimizing the risk of cross-contamination.

<sup>1</sup>Cook T et al., NAP4 - 4th National Audit Project of The Royal College of Anaesthetists and The Difficult Airway Society, Major complications of airway management in the United Kingdom, Report and findings, March 2011

## Specifications

Optical system	
Field of View	85°
Direction of View	0° (forward viewing)
Depth of Field	8-19 mm
Illumination method	LED
Insertion portion	
Bending section	150° up, 130° down°
Insertion cord diameter	5.0 mm (0.20")
Distal end diameter	5.4 mm (0.21")
Maximum diameter of insertion portion	5.5 mm (0.22")
Minimum endotracheal tube size (inner diameter)	6.0 mm
Minimum double lumen tube size (inner diameter)	41 Fr
Working length	600 mm (23.6")
Channel	
Average inner diameter	2.2 mm (0.087")
Minimum instrument channel width	2.0 mm (0.079")
Suction connector	
Connecting tube inner diameter range	Ø7mm +/- 1mm
Operating environment, storage & transportation	
Temperature - transportation	10 ~ 40° C (50 to 104° F)
Temperature - operating environment	10 ~ 40° C (50 to 104° F)
Temperature - storage	10 ~ 25° C (50 to 77° F)
Relative humidity	30 ~ 85%
Atmospheric pressure	80 ~ 109 kPa
Altitude	≤2000m
Sterilisation	
Method of sterilisation	EtO



Ambu® aScope™ 3 Regular and Ambu® aView™



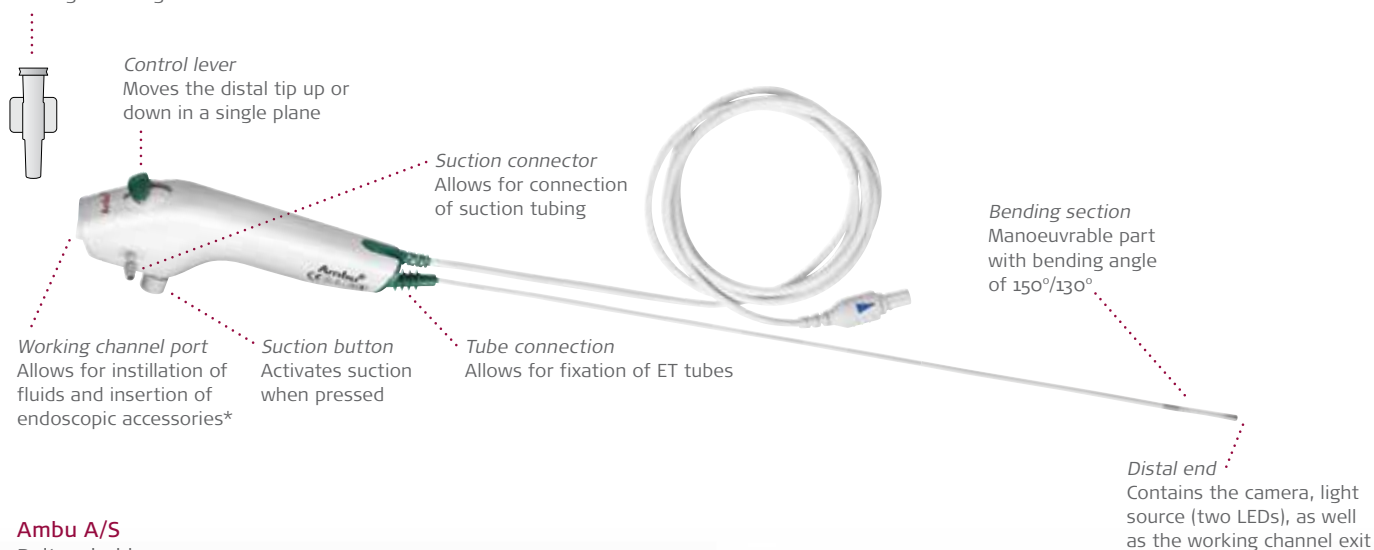
The ergonomic and lightweight handle is designed for optimal user comfort

## Ordering specifications

Item no.	Quantity (Ambu® aScope™ 3 Regular 5.0/2.2)
403001000	5

### Introducer

To facilitate introduction of Luer Lock syringes and soft endoscopic accessories through working channel



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\*There is no guarantee that accessories selected solely using this minimum instrument channel width will be compatible in combination.