A Step Ahead with System Integration

DCI® VIDEO INTUBATION SYSTEM
KARL STORZ –
Synonymous with Innovation and Competence in Endoscopy for over 60 Years

The New DCI® VIDEO INTUBATION SYSTEM
One Camera – all Possibilities
The DCI® System*

• Brilliant image in customary KARL STORZ quality – via integrated Moiré filter
• Rapid instrument changeover in seconds – with simple click connection
• Swift application on patients – except for image sharpness, no further adjustment necessary
• Optimized image size – the displayed image can be readily adjusted for optimal magnification

One System – all Units Quick at Hand**

• TELE PACK™ – unit with video processor, light source, monitor and PCMCIA card
• AIDA™ DVD – module for first-class videos and still images on CD-ROM and DVD
• BRAUN Instrument Cart – practical, sturdy and mobile

The Perfect Solution:
A Camera for Complete Airway Management

• BERCi-KAPLAN Video Laryngoscope
• KARL STORZ Intubation Fiberscopes in all sizes
• BONFILS Intubation Endoscopes in all sizes
• BRAMBRINCK Intubation Endoscope

* Direct Coupled Interface
** DCI® camera head adapts to all TELECAM® systems
The New BERCI-KAPLAN DCI® Video Laryngoscope

Visualization
- First-class image with 15,000 pixels
- Optimal image adjustment with blade tip for better orientation
- Display of inserted tube for quality control

Methodology
- Clear image and co-ordination, maneuver (BURP) possible
- Short visual axis allows lifting of epiglottis
- Less pressure on blade due to short visual axis
- Intubation can be transmitted via various media
- Entire intubation procedure can be documented.

Benefits
- Training through learning-by-doing
- Visualization and early diagnosis of difficult intubations
- Risk of patient trauma reduced
- Visualization and rapid changeover to intubation fiberscope possible, especially in case of double lumen tube placement

Hygiene
- Quick and easy to prepare
- Waterproof and fully immersible for cleaning, disinfection and sterilization up to 60°C
- Sterilizable via EtO, FO-Gas, STERIS® and STERRAD®
Different Blade Types – The Future Holds No Limits

- Robust construction – one complete unit
- Designed for routine day-to-day use
- Easy to handle following brief training

Photo: Villingen-Schwenningen Clinic
The New DCI® Intubation Fiberscope

Methodology
- Intubation fiberscopes in 5 different sizes
- Rapid changeover from i.e. video laryngoscope
- Emergency function as eyepiece can be rapidly attached to i.e. LED battery light source

Benefits
- Optimum learning curve through training with learning-by-doing
- Two heads are better than one: problems can be viewed by the entire team
- Facilitates teamwork, especially during dilatation tracheostomy
- Visual control and rapid changeover to intubation fiberscope, especially in case of double lumen tube placement

Hygiene
- Preparation – also possible without camera system
- Waterproof and fully immersible for cleaning, disinfection and sterilization up to 60°C – including STERIS® and STERRAD®
Three Different Fiberscope Sizes – from infants to adults the right size

- The right choice for expectedly difficult airways and bronchoscopy
- Outer diameter of 1.8 mm, 2.8 mm, 3.7 mm, 4.5 mm and 5.2 mm
- Sheath length ranging from 35 cm, 50 cm to 65 cm – the right length, also for intubated patients
The New BONFILS / BRAMBRINCK DCI® Intubation Endoscope

Methodology
• First-class image with 35,000 pixels
• Optimal distal angle of 40° enables rapid location of vocal cords
• Retromolar instrument insertion as far as vocal cords
• Flexibility – various intubation possibilities – including laryngoscopy
• Insertion of endotracheal tube under continuous visual control
• Designed for both standard and difficult intubation
• Specially designed for unexpectedly difficult intubation
• Can also be used in thorax anesthesia with double lumen tube

Benefits
• Training through learning-by-doing
• Visualization of Difficult Airway Management
• Risk of patient trauma reduced
• Rapid changeover from video laryngoscope to BONFILS intubation endoscope
• Emergency function as eyepiece can be rapidly attached to, for example, LED battery light source

Hygiene
• Quick and easy to prepare
• Waterproof and fully immersible for cleaning, disinfection and sterilization up to 60°C – including STERIS® and STERRAD®
Three Different Endoscope Sizes – The Right Instrument for Tube Size as of 2.5 mm

• The right choice for the unexpected difficult airway
• Simple and robust design
• Designed for routine day-to-day use
• Easy to handle following brief training

Current Studies

• Halligan, Charters, „A clinical evaluation of the BONFILS Intubation Fibroscope“, Anaesthesia 2003, 58 pages 1087–1091

• Bein, Worthmann, Scholz, Brinkmann, Tonner, Steinfath, Dörges, „A comparison of the intubating laryngeal mask airway and the BONFILS intubation fibroscope in patients with predicted difficult airway“, Anaesthesia 2004, 59 pages 668–674

• Bein, Yan, Tonner, Scholz, Steinfath, Dörges, „Tracheal intubation using the BONFILS intubation fibroscope after failed direct laryngoscopy“, Anaesthesia 2004, 59 pages 1207–1209
KARL STORZ – A Step Ahead with System Integration
DCI® VIDEO INTUBATION SYSTEM

TELE PACK
20 0430 11-020  KARL STORZ TELE PACK™, PAL, endoscopic
CCU video unit, incl. 24 Watt HI-Lux light source,
integrated keyboard, 12” LCD monitor and Image
Processing Module,
power supply: 110–240 VAC, 50/60 Hz
consisting of:
20 0430 20-020  TELE PACK™ Control Unit
20 0410 32  PCMCIA PC Card, 64MB
400 A  Mains Cord
536 MK  BNC Connecting Cable,
length 180 cm
547 S  VHS (Y/C) Connecting Cable,
length 180 cm
20 0431 11-020  Same, NTSC

DCI® Camera Head
20 2620 30  DCI® Camera Head, PAL, with integrated optical
Moiré filter

20 2621 30  DCI® Camera Head, NTSC, with integrated optical
Moiré filter

495 DV  Fiber Optic Light Cable, for DCI® telescopes,
diameter 2.5 mm, length 300 cm
KARL STORZ AIDA™ DVD
with Smart Screen color system: PAL/NTSC
operating voltage: 100 - 240 VAC; 50/60 Hz

consisting of:

KARL STORZ AIDA™ DVD
with integrated DVD/CD-writer
and integrated Smart Screen

Power Cord
Power Cord, USA-version
2 BNC Connecting Cable,
length 180 cm
S-VHS (Y/C) Connecting Cable,
length 180 cm
2 Adapters BNC-Cynch
Serial Data Cable, length 20 cm
DVI Connecting Cable,
length 20 cm

Mobile Videocart,
consisting of:
Basic Videocart, rides on 4 antistatic dual wheels,
2 equipped with locking brakes, 1 fixed shelf with push
handles, main switch in side boom, 1x drawer unit with
lock, integrated cable conduit in both booms, 2x horizontal
cable conduits, 1 with cable manager, 1x set of non-sliding
stands for units, 2x equipment rails, 3x mains cords,
2x 200 cm and 1x 100 cm, power box with socket board
with 6 mains sockets and 6 grounding plugs

Dimensions:
Videocart: 530 x 1090 x 645 mm (w x h x d),
shelf: 430 x 480 mm (w x d),
caster diameter: 125 mm
BERCI-KAPLAN DCI® Video Laryngoscope

8401 A  BERCI-KAPLAN DCI® Video Laryngoscope, with MACINTOSH Laryngoscope Blade, size 3, resolution 15,000 pixel, angle of view 60°, for DCI® technology

8401 B  BERCI-KAPLAN DCI® Video Laryngoscope, with MACINTOSH Laryngoscope Blade, size 4, resolution 15,000 pixel, angle of view 60°, for DCI® technology

8401 C  BERCI-KAPLAN DCI® Video Laryngoscope, with DOERGES Laryngoscope Blade, resolution 15,000 pixel, angle of view 60°, for DCI® technology

8401 D  BERCI-KAPLAN DCI® Video Laryngoscope, with MILLER Laryngoscope-Blade, size 0, angle of view 60°, DCI technology

8401 E  BERCI-KAPLAN DCI® Video Laryngoscope, with MILLER Laryngoscope-Blade, size 3, angle of view 60°, DCI technology

8401 G  BERCI-KAPLAN DCI® Video Laryngoscope, with MILLER laryngoscope blade size 1, angle of view 60°, for DCI® technology

8401 K  BERCI-KAPLAN DCI® Video Laryngoscope, for DCI® technology, with MACINTOSH laryngoscope blade, size 2, angle of view 60°

DCI® Intubation Fiberscope

11605 EV  Intubation Fiberscope, with DCI® connection, Direction of View: 0° Angle of view: 70° Working length: 35 cm Total length: 43 cm Distal tip: 1.8 mm

11301 AAD  Intubation Fiberscope, with DCI® connection Direction of view: 0° Angle of view: 88° Working length: 65 cm Total length: 98 cm Working channel diameter: 1.2 mm Distal tip: 2.8 mm Deflection: 140°/140°

11301 ABD  Intubation Fiberscope 2.8 x 50, with DCI® connection Working Channel: 1.2 mm, Direction of View: 0°, Angle of View: 88°, Working Length: 50 cm, Dist. Outer Dia.: 2.8 mm, Deflection: 140°/140°
11302 BDD **Intubation Fiberscope 3.7 x 65**, with DCI® connection,  
Working Channel: 1.5 mm  
Direction of View: 0°  
Angle of View: 90°  
Working Length: 65 cm  
Dist. Outer Dia.: 3.7 mm  
Deflection: 140°/140°

11303 BDD **Intubation Fiberscope 4.5 x 65**  
Working channel: 1.2 mm  
Direction of View: 0°  
Angle of view: 110°  
Working length: 65 cm  
Dist. Outer Dia.: 4.5 mm  
Deflection: 140°/140°

11301 BND **Intubation Fiberscope 5.0 x 65**,  
with DCI® connection,  
Working Channel: 2.3 mm  
Direction of View: 0°  
Angle of View: 110°  
Working Length: 65 cm  
Dist. Outer Dia.: 5.2 mm  
Deflection: 140°/140°

**BRAMBRINCK Intubation Endoscope**

11605 CV  
BRAMBRINK **Intubation Endoscope**,  
with DCI® connection, 35,000 pixels,  
outer diameter 2 mm, semiflexible,  
for tube sizes 2.5-3.5 mm, magnification 40 x, sheath working length 22 cm, distal angle 40°,  
including adaptor 10332 BA, for tube placement and O₂ application

**BONFILS Intubation Endoscope**

10332 BD  
BONFILS **Retromolar Intubation Endoscope**, with DCI-connection, 35,000 pixels,  
outer diameter 3.5 mm, for ETT 4.0 - 5.5 mm,  
working length 35 cm, distal angle 40°,  
including tube holder 10332 BA for tube placement and O₂ application

10331 BD  
BONFILS **Retromolar Intubation Endoscope**,  
with DCI® connection, 35,000 pixels,  
outer diameter 5.0 mm, for ETT > 5.5 mm,  
working length 40 cm, distal angle 40°,  
including tube holder 10331 BA for tube placement and O₂ application

20260031  
**Adaptor**, for use with DCI® telescopes as eyepiece version