

Double-lumen endotracheal tube with double beak

Inventors:

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Executive Summary

Dr. Randy Blank, Anesthesiologist at the University of Virginia, has developed an improved double lumen endotracheal tube that overcomes the difficult passage through the glottis during intubations and minimizes risk of tracheobronchial injury and potentially life threatening complications.

Double lumen endotracheal tubes are commonly used to permit and facilitate lung isolation in patients undergoing a variety of intrathoracic surgical procedures. Conventional double lumen tubes are stiff with a blunt tip and are difficult to pass through the glottis during intubation, particularly in patients with challenging airway anatomy. Difficult intubations are likely to cause mild to moderate traumatic injury to glottis structures and the tracheal mucosa, and may cause severe and life threatening tracheobronchial injury.

The double beaked design allows for easier advancement through challenging airway anatomy, reducing the risk of traumatic injury. The offset beak design reduces risk of occlusion during advancement.

Market size

- Approximately 20 million endotracheal tubes sold in the US annually and 30 million in the rest of the world
- 85% of intubations occur during non-emergency surgery and 15% are in the emergency room of ICU

Intellectual Property

- PCT/US2017/041909 filed July 13, 2017

Opportunity

- Partnership for development
- Exclusive/Non-exclusive licensing



Double-lumen endotracheal tube with beak

Easier and safer for advancing through challenging anatomies

Top and bottom beaks are different sizes to minimize flow restriction



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