



## Monroe Livingston Region Program Agency

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To: All ALS Providers

From: Jeremy T. Cushman, MD, MS, EMT-P *J. Cushman*  
Regional Medical Director

Date: June 6, 2013

**Re: Advisory 13-06: King Airways**

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It has come to our attention that there have been some complications with King Airway placements that include significant oropharyngeal and vocal cord edema after placement. Although the King Airway is a very effective alternative airway device, it is not a definitive airway and as a result, must be converted to an endotracheal tube upon ED arrival. It appears that many King Airway devices are being overinflated, which results in venous engorgement and subsequent oropharyngeal and vocal cord edema which dramatically increases the difficulty of later endotracheal tube placement.

ALS providers are reminded to select the appropriate device based on patient height, to use the manufacturer's suggested inflation amounts, AND to check the cuff pressure using the pilot balloon to assure only enough inflation to prevent air movement around the cuff. This may require frequent reassessments of cuff pressure throughout patient contact. Overinflating the balloon should be specifically avoided.

The manufacturers recommended cuff volumes for the King LT-D are included in the table below and are also easily located on the tube prior to placement. Keep in mind the King LTS-D requires slightly smaller cuff volumes (5-10 ml) than the LT-D.

Size	Patient Criteria	Connector Color	Inflation Volume
2	35-45 in	Green	25-35 ml
2.5	41-51 in	Orange	30-40 ml
3	4-5 ft	Yellow	45-60 ml
4	5-6 ft	Red	60-80 ml
5	> 6 ft	Purple	70-90 ml

With any questions, please do not hesitate to contact the Regional Program Agency.