

aeris®

Next Generation  
Airway Dilation

Designed for Pediatric  
and Adult Patients





## Next Generation Airway Dilation

DESIGNED FOR PEDIATRIC & ADULT PATIENTS

Maximize outcomes and minimize risks with the Aeris® Balloon Dilation System.

Conceived by an airway surgeon, Aeris addresses the issues of slippage in airway stenosis. The exclusive non-slip design of the Aeris balloon ensures safe and controlled dilation of the airway.

### NON-COMPLIANT BALLOON

Aeris' non-compliant balloon provides evenly distributed radial expansive force over the circumference of the stenosis, allowing the Aeris to apply the greatest pressure to achieve full dilation at the narrowest points of stenosis.

### BROADEST RANGE OF BALLOON SIZES

Aeris offers the broadest range of non-compliant balloon sizes available. Physicians can treat both pediatric and adult patients with confidence.

### COST EFFECTIVE

Aeris catheters are sold in single packs, allowing hospitals to effectively manage par levels.

### SINGLE LUMEN CATHETER

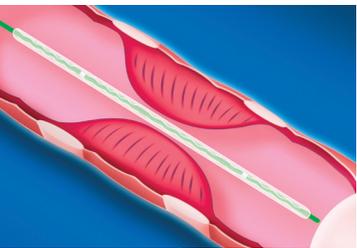
Aeris single lumen catheter allows for rapid inflation and deflation times, up to three times faster than competitors.

### COLOR CODED LUER LOCKS

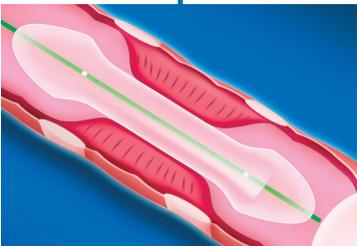
The balloon catheter luer locks are color coded to match the proper atm setting on the Aeris inflation gauge, reducing the occurrence of improper inflation. Aeris simplifies decision making further with just two inflation pressures indicated on the dial.



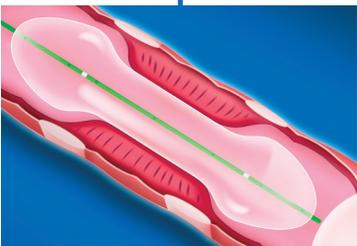
# Exclusive Non-Slip Design



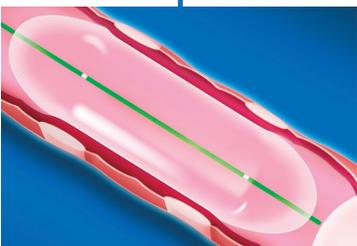
Under direct laryngoscopic visualization, the AERIS catheter is passed through the glottis and is centered over the stenosis.



A narrow rod telescope is introduced to confirm the balloon is centered within the stenosis. With the telescope in place, the balloon is inflated to the target pressure.



The exclusive non-slip design of the AERIS balloon ensures a safe, controlled dilation.



AERIS' non-compliant balloon material provides optimal radial expansion force over the stenotic area, maximizing outcomes and minimizing the risk of rupture.

## INTELLIGENT SIZING FOR PEDIATRIC & ADULT PATIENTS

PATIENT AGE	AGE APPROPRIATE ETT (uncuffed)*	OD on ETT (mm)	DILATION GOAL Diameter of Larynx (mm)	DILATION GOAL Diameter of Trachea (mm)
Premature < 30 weeks	2.5mm	3.6		5
Premature > 30 weeks	3.0mm	4.3	5	6
Neonates	3.5mm	4.9	6	7
1 Year	4.0mm	5.6	6	7
2 Years	4.5mm	6.2	7	8
4 Years	5.0mm	6.9	8	9
6 Years	5.5mm	7.5	8-9	9-10
8 years	6.0mm	8.2	8-9	10
10 Years	6.5mm	8.9	10	10-12
12 Years	7.0mm	9.5	10-12	12-14
14 Years	7.0-7.5mm	10.2	12	12-14
16 Years	7.0-8.0mm	11	12	14-16
Adult Female	7.0-8.0mm		12-14	14-16
Adult Male	7.5-8.5mm		14-16	16-18

\*Mallinkrodt oronasal uncuffed endotracheal tubes.

Formula: Take the outer diameter of an age appropriate endotracheal tube, and add 1mm for the larynx and 2mm for the trachea.

Sizing shown is a general guideline for ordering. Each patient must be assessed by a surgeon prior to use.