Self-Lubricated Stylet for Endotracheal Tubes

To the Editor: It occurred to us that a teflon-coated stylet might eliminate the need for lubricating jelly, especially when used with small-diameter endotracheal tubes. We constructed such a stylet in the following manner: 1. A ball was formed at one end of a length of copper wire (American Wire Gauge 12). 2. A piece of teflon tubing (American Wire Gauge 12) was slipped onto the wire up to the ball, and the other end bent into a U-shape with pliers (fig. 1).

As anticipated, this stylet proved surprisingly easy to remove from any type of endotracheal tube down to size 14 French. An improved version of this stylet with an adherent teflon coating similar to that on cookware could be produced commercially.

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Fig. 1. Teflon-coated stylet.

Improved Intravenous Infusion Set

To the Editor: An IV infusion set of sufficient length, with a conveniently located injection site, is much to be desired but difficult to find. These two features usually are provided by adding sections of commercially available plastic extension tubing, 18-30 inches in length, to the basic infusion set. This common practice introduces several undesirable factors: 1) Increased cost, 2) possibility of leakage or actual separation at the connecting adapter joints—especially if fluids are administered under pressure, and 3) increased chance of contamination.

Several years ago Abbott Laboratories marketed an infusion set, Venopak 78, which, as the name implies, has an over-all length of 78 inches. This set solved the length problem but only increased the problem of the injection site since the latter is located 7 inches from the male needle adapter.

Measuring the tallest member of our department (6'4''), we found that the distance from the back of his hand to the side of his neck was approximately 30 inches. Allowing for the loop in the tubing, we calculated that by moving the injection site to 36 inches from the male needle adapter we would have an infusion set of sufficient length with a readily accessible injection site located at the side of the patient's head, whether the arm with the infusion was at the patient's side or at a right angle to the body. Anything less than 36 inches was shown to be inadequate.

Abbott has cooperated and now supplies us with an infusion set 78 inches long, with an injection site 38 inches from the male needle adapter. This set (Rx 15,975), made up for us as a special item, has eliminated the need for extension tubing and has proven to be most convenient.

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