

## **J-Wand® Testimonial from Ryan Lowther, CRNA, MSN**

As a Nurse Anesthetist, I have used the J-Wand on several occasions and found it to be very simple to learn how to use. The videos that have been made to describe the stylet and how to use it were very useful and straight forward.

I used the J-Wand electively on a patient who appeared preoperatively to have a normal airway. However, after induction and mask ventilation it became clear that the patient's cervical range of motion was more limited than expected. The patient also had a substantial overbite. These factors contributed to an anterior airway. The GlideScope® was to be used electively so that other anesthesia providers could watch the J-Wand being inserted and utilized. The J-Wand proved to be helpful, as this patient's airway was not as easy as expected, even with the GlideScope. After gaining a view of the vocal cords, the J-Wand was inserted right alongside the GlideScope blade, as is instructed in the video tutorial. The curved end of the J-Wand was perfectly aligned with the anterior view of the vocal cord and was inserted. No cricoid pressure, tracheal movement, or movement of the head was needed. The curved end of the J-Wand went through the vocal cords, the endotracheal tube was positioned properly and then the J-Wand was easily removed from the airway. The apneic oxygenation port was not utilized during this sequence, but the port is a great addition to the device and could prove to be very useful in difficult airways.

In my practice, if a difficult airway is encountered and a GlideScope is needed, I have always used the rigid stylet that comes with the GlideScope. Although this rigid stylet works and can facilitate intubation, it's not uncommon for other airway maneuvers to have to be performed in order to get the rigid stylet through the vocal cords. Often the stylet falls posterior to the arytenoid cartilages and into the piriform recess. Often cricoid pressure/tracheal movement is needed to position the rigid stylet between the vocal cords. This is very common especially in patients with limited range of motion or patients wearing cervical collars. The J-Wand is a solution to that problem. The curved end reduces the need for other airway manipulations.

The J-Wand has become a useful tool in my practice. It is now stocked on the department's GlideScope in case the need arises for it. I would highly recommend the J-Wand.

This testimonial is a voluntary, unpaid clinician assessment of the product.

J-Wand and D·R Burton Healthcare are registered trademarks of D·R Burton Healthcare. Other trademarks of property of their respective owners.