

AT Kelly Torso

Directions for Use



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helping save lives

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The AT Kelly Torso (260-00001) is a lifelike manikin, which realistically simulates a male patient. It is specifically designed for training professionals in the practice of pre-hospital trauma skills.

The manufacturing quality of this simulator should provide many sessions of training when reasonable care and maintenance are practiced.

Laerdal Recommends:

Endotracheal tube - Size 7.5 ID to 8.5 ID

Stylet to assist when intubating

Straight or curved laryngoscope blade - Size 3 or 4

Tension pneumothorax decompression - 16 or 18-gauge IV catheter

Items Included:

- (1) AT Kelly Torso Trainer
- (1) Bladder Replacement Kit
- (1) Manikin Lubricant
- (1) Tank Top
- (1) Carry Case
- (1) Laerdal Global Warranty Booklet
- (1) Directions for Use

Skills Taught:**Airway Management Skills:**

- Oral Intubation
- Nasal Intubation
- Oropharyngeal airway insertion
- Nasopharyngeal airway insertion
- Digital Intubation
- EOA/EGTA/PTL
- Combitube® Insertion
- Suctioning

Circulatory Skills:

- Subclavian Cannulation

Other Skills:

- Pneumothorax Decompression (Bilateral Mid-Axillary Sites and Bilateral Mid-Clavicular)
- Chest Compressions
- Abdominal Thrust
- Stomach Auscultation to verify proper airway positioning

Preparing Manikin for Use:

Head:

Head is connected to torso with a long bolt at base of neck, secured with a wing nut.

To remove:

1. Unfasten chest skin at shoulders.
2. Pull it back to expose chest cavity.
3. Lift hard chest plate to locate lungs and esophagus.
4. Lift esophagus, trachea and lungs out of way.
5. Unscrew and remove the wing nut and washer at base of neck.
6. Head will now slip out of torso.

To attach, reverse procedure.

Lungs:

Lungs may be removed from bronchial tubes by unscrewing them from connectors. To replace, reverse procedure.

Abdominal Thrust:

To remove abdominal thrust module, remove screws from each side of manikin. Module will slide out. To replace, reverse procedure.

Instructions for Use:

Airway Management:

- Spray inside of pharynx, both nostrils and all intubation tubes with a liberal amount of Manikin Lubricant or liquid soap.
- Recommended endotracheal tube size is 7.5 ID to 8.5 ID.
- The use of a stylet to assist when intubating is recommended.
- Straight or curved laryngoscope blades, size 3 or 4 are recommended.

Manually Generated Carotid Pulse:

Locate red carotid pulse bulb on right side of manikin. Squeeze bulb to generate desired pulse rate.

Tension Pneumothorax Decompression:

1. Locate black blood pressure bulb on right axillary side of the torso.
2. Tighten air release knob so that no air escapes as you pump bulb.
3. Pump bulb several times to prepare each of four (4) sites for decompression.
4. Insert either a 16 or 18 gauge IV catheter.

Puncturing correct intercostal space will allow “hissing of air” as chest is decompressed.

To repair external puncture sites:

1. Use a tongue depressor or small spatula to apply a thin layer of putty wax to puncture site.
2. Smooth out to desired appearance.

To replace internal bladder bags:

(A) Bilateral Mid-Clavicular Sites:

- Remove chest skin from torso.
- Lift chest plate exposing underside.
- Remove screws that secure Velcro® strap. (Figure 1)

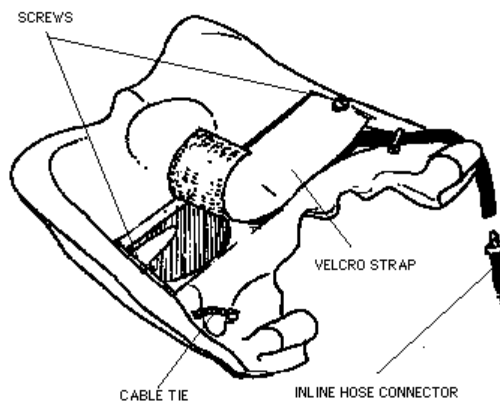


Fig. 1

- Remove foam pads.
- Disconnect bladder hose from inline hose connector, being sure hose does not fall through hole and into torso.
- Remove bladder from site cavity and slip hose out of cable tie.

- Trim bladder tubing to match original tubing length to fit this manikin style. Insert new pneumothorax bladder into site cavity and reposition hose under cable tie.
- Reconnect hose to inline hose connector.
- Replace foam pads over pneumo bladders.
- Secure Velcro® strap to chest plate with screws removed previously.
- Return chest plate to proper position on torso.
- Replace chest skin over torso, being sure to secure skin at shoulders.

(B) Bilateral Mid-Axillary Sites:

- Remove chest skin from torso.
- Remove pneumo pad from side of torso. (Figure 2)
- Disconnect bladder hose from inline hose connector, being sure hose does not fall through hole and into torso.
- Remove bladder from pneumo pad and discard.
- Trim bladder tubing to match original tubing length to fit this manikin style. Connect new bladder hose to inline hose connector.
- Insert new pneumo bladder into pneumo pad.
- Replace chest skin over torso, being sure to secure skin at shoulders.

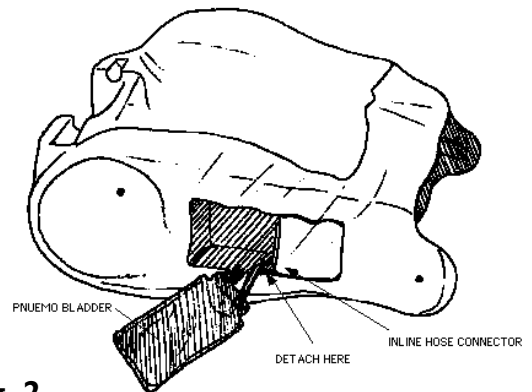


Fig. 2

Central Vein Cannulation:

Two central veins may be cannulated: internal jugular (central approach only) and subclavian.

1. Attach IV bag and tubing to central vein tube located on right side of manikin. (It is in same location as blood pressure bulb and carotid pulse bulb).
2. Fill IV bag with desired amount of fluid and infuse.
3. Aspirate line using a needle and large syringe until fluid is drawn.

To remove, reverse procedure.

Care and Maintenance:

1. Clean with mild soap and water; do not submerge manikin or parts in cleaning fluids or water.
2. Use only on clean surface. Avoid felt tipped markers, ink pens, acetone, iodine or other staining products and avoid placing the manikin on newsprint or inked lines of any kind.
3. To ensure longevity, each manikin should be cleaned after each training session and a general inspection should be conducted regularly.
4. Store properly between teaching sessions.



Cautions and Warnings

This product contains **Natural Rubber** latex which may cause allergic reactions when in contact with humans.

Replacement Parts:

For latest version of Spare Parts and Accessories, visit www.laerdal.com

Global Warranty See the Laerdal Global Warranty Booklet,
or www.laerdal.com



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