

HOSPITAL: _____

Respiratory Care Services Policy and Procedure Manual

Policy and Procedure:	Universal Bite Block™
Area: Respiratory Care Services	Performed by: Respiratory Care Practitioners

Policy Number:	Approved by:
	Date:

Current Effective Date	Approved by:
	Date:

Review Date	Approved by:
	Date:

Revised Date	Approved by:
	Date:

POLICY

This policy assures the standardized use of the **Universal Bite Block™** for use as positive protection from biting of the endotracheal tube and the pilot balloon tube.

PURPOSE

The purpose is to provide an easily implemented protocol to be used by the Respiratory Care Practitioner with effective guidelines and consistent instruction for use and patient application of the **Universal Bite Block™** with an endotracheal tube or similar device.

DEFINITION

The **Universal Bite Block™** fits around an endotracheal tube and prevents biting of endotracheal tubes or similar devices and helps provide protection of the pilot balloon tube on the endotracheal tube.

B&B Universal Bite Block/Adult - PN#11160 fits endotracheal tube sizes 6.0 - 9.5 mm

B&B Universal Bite Block/Pediatric - PN#11170 fits endotracheal tube sizes 4.0 - 6.0 mm

SETTINGS

The **Universal Bite Block™** should be placed and secured to the endotracheal tube in an environment in which the patient can be physiologically monitored and in which emergency equipment and appropriately trained health care providers with airway management skills are immediately available.

EQUIPMENT

Universal Bite Block™ (includes the Universal Bite Block™, Releasable Cable Tie and Blue Cap), Alcohol Swabs, Bandage Scissors, Skin and Oral Care Supplies, Suction setup with an appropriate size suction catheter, an oral suction attachment. Use of B&B endotracheal tube holders are recommended with the Universal Bite Block.

PROCEDURE

A: Application Procedure/Preparation

1. Remove the Universal Bite Block from the package and release the Cable Tie and remove the Blue Safety Cap (Figure 1).
2. To release the Cable Tie (Figure 2), push down the small tab on the Cable Tie hub and push the excess tab through the hub.
3. Secure the endotracheal tube per instructions or hospital policy.
4. After securing the endotracheal tube, gently pull the pilot tube in a straight line toward the end of the endotracheal tube.

B: Application Procedure/Action Steps

1. Below the tape on the endotracheal tube, start with the Universal Bite Block at a slight angle & push the back of the Universal Bite Block onto the endotracheal tube.
2. Keeping the Universal Bite Block at a slight angle gently slide it onto the tube.
3. Make sure the pilot balloon tube line is between the Universal Bite Block and the endotracheal tube.
3. Keep the pilot balloon line taut; gently pull the Universal Bite Block forward up the endotracheal tube until the retaining flange is over the taped portion of the endotracheal tube.
4. At this point rotate the retaining flange from a 6 O'clock position to a 3 O'clock position so that it is lateral to the endotracheal tube.
5. Take the elongated tab of the Cable Tie & pass it around the endotracheal tube tape & through its Locking Hub.
6. Firmly pull the long leg of the Cable Tie, while securely holding the Cable Tie Hub. Pull until secure.
7. If using the B&B StabilTube™ or B&B LockTite™, place the cable tie around the endotracheal tube above the first cable tie.
8. Upon ascertaining correct placement of the Universal Bite Block, the cable tie may be trimmed to within 1/4 inch of the Hub on 11160 and flush on 11170.
9. Replace the Blue Safety Cap on the end of the trimmed releasable Cable Tie.
10. To adjust the position of the Universal Bite Block, release the Cable Tie and adjust the Universal Bite Block/E.T. Tube position & retighten the Cable Tie. To release the Cable Tie (Figure 2), push down the small tab on the Cable Tie hub and push the excess tab through the hub.

C: Documentation

Chart the Time, Date, endotracheal tube size and cm marking at the appropriate anatomical landmarks on the Ventilator flow Sheet.

D: Removal and Changing of Universal Bite Block

1. Prior to changing the position or removing the Universal Cable Tie, release the Cable Tie as shown in Figure 2.
2. While stabilizing the endotracheal tube, gently move the position of the Universal Bite Block. Secure the Cable Tie and replace the Blue Cap.

E: Precautions and Adverse Events

1. CAUTION: This should be used with caution on patients with capped teeth, bridges or false teeth, as permanent damage may occur to teeth. Benefits should be weighed against possible damage to the teeth by the ordering physician.
2. Possible Adverse effects include but are not limited to lip sores. Try to keep the Universal Bite Block toward the center of mouth.

3. Periodically inspect the Universal Bite Block and patient every shift, prn or more frequently in case of diaphoresis or copious oral secretions. Make sure the Universal Bite Block is in the proper position and working properly.
4. Should cuff pressure filling problems occur, gently pull the pilot balloon line taut to remove any kinks.
5. Pediatric endotracheal tubes can distort if over tightened. Check the endotracheal tube after tightening the Cable-Tie and if distorted, remove cable tie with nail clippers, and tape to endotracheal tube.
6. Do not pull the Releasable Cable Tie tight with any other device except two fingers. If pulled too tight the endotracheal tube may hourglass and alter the inner diameter of the endotracheal tube. This can be noted by a significant dip in the endotracheal tube surface on either side of the Cable Tie.
7. CAUTION: If the Cable Tie is not used, the Tab must be securely taped to the endotracheal tube.
8. The Universal Bite Block should be changed every three days for hygienic purposes.
9. The Universal Bite Block is intended for single patient use.

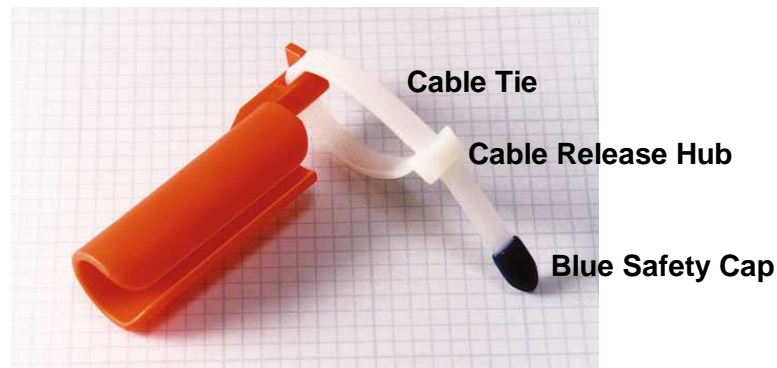


Figure 1

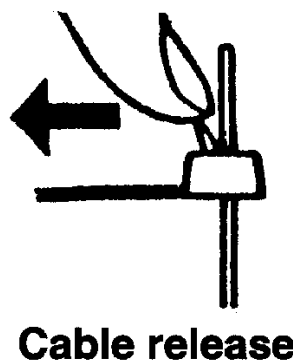


Figure 2

REFERENCES

1. AARC Clinical Practice Guideline/Management of Airway Emergencies
Respir Care 1995; 40(7):749-760)