SSCOR

What is the SALAD Technique?

The SALAD (Suction Assisted Laryngoscopy and Airway Decontamination) technique calls for constant suction provided by a catheter (in this case, the **SSCOR DuCanto Catheter**, developed by Dr. James DuCanto and **S**SCOR, Inc.). After clearing contaminant from the airway, the catheter can be left in place, to the left of the laryngoscope blade continuously removing blood, vomit and other materials. The practitioner can intubate, with the catheter in place via either direct or video laryngoscopy.

.26" I.D.

SSCOR DuCanto Catheter™

✳ For a free sample of the **S**SCOR DuCanto Catheter visit www.sscor.com/ducanto-sample.

✳ To see the video of the SALAD Procedure visit www.sscor.com/ducanto-video.

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Why is the SALAD Technique important?

What a difference effective suctioning can make to the resuscitated patient. Effective suctioning clears the view for the care giver executing the intubation. It removes material that otherwise might enter the lower airway. Aspiration of foreign material can cause *pneumonia slowing recovery or resulting in death.

Who Developed this Technique?

The SALAD Technique was developed by Dr. James C. DuCanto. Dr. DuCanto is passionate about airway management and minimizing the risks of aspiration and its subsequent effects.

Dr. DuCanto is an anesthesiologist with 20 years' experience. Dr. DuCanto works at the Aurora St. Luke's Medical Center in Milwaukee, Wisconsin where he serves as a staff anesthesiologist, Director of the Simulation Center, and director of the Anesthesiology rotation for students and residents.

SALAD
Suction Assisted Laryngoscopy & Airway Decontamination

*Pneumonia caused by aspiration or mechanical ventilation is probably the most important complication in comatose post-cardiac arrest patients, occurring in up to 50% of patients after out-of-hospital cardiac arrest. – "Post-cardiac arrest syndrome: Epidemiology, pathophysiology, treatment, and prognostication" – Jerry P. Nolan et al.

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