The AMT Bridle™
Nasal Tube Retaining System

The Comfortable Alternative for Nasal Tube Securement

What is a Nasal Bridle?

What is it?: A nasal bridle is a securement method used to discourage patients, young or old, from pulling on their nasoenteric feeding tube. Reports show that 40 percent of nasogastric feeding tubes are dislodged, which may lead to the unnecessary surgical placement of a feeding device or conversion to parenteral nutrition support.* A nasal bridle is an effective and safe way to secure a patient’s nasal tube, retaining the nutrition flow to the patient.


What does it look like?: The nasal bridle system has several distinct pieces; a blue retrieval probe, a catheter with removable safety stylet and blue bridle tubing, a pre-attached clip, a removal tool and a lubricant packet. Most of these components serve to thread the bridle into place within the nasopharynx. Once properly inserted, only the soft bridle tubing and device clip remain. The other pieces are discarded.

The blue retrieval probe and catheter have strong rare earth magnets at their tips. The retrieval probe is inserted into the nostril without a nasal tube. The catheter with safety stylet and bridle tubing is inserted into the opposite nostril. Both the probe and stylet are advanced towards the back of the nasal septum where the two magnets will connect around the vomer bone inside the nasal cavity. The magnets allow the two pieces to unite creating the bridle loop with bridle tubing.

Once the bridle loop has been established, slide the pre-attached clip up the bridle tubing to approximately 1cm or alternatively one finger width from the nostril, and just above the lip. Then place the nasal tube into the
clip's defined nasal tube region. From here, take the loose strands of bridle tubing and place them within the clip, and close the clip. Once the clip is closed, tie the two strands of bridle catheter together into a simple knot below the clip, and cut the excess 1cm below the knot, securing the nasal tube.

**Improving nutritional outcomes while reducing nasal tube pullout costs!**

The AMT Bridle™ Family has been shown to:

- Dramatically reduces pullout by 72%*
- Reduce costs of extended length of stay due to sub-optimal nutrition
- Reduce costs of clinicians' time to replace nasal tube(s)
- Reduce costs of new nasal tube, formula, and supplies
- Reduce unreimbursed expenses under managed care
- Reduce costs of secondary x-ray or fluoroscopy
- Reduce costs of hospital-acquired conditions from nasal tube migration


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**How Does a Nasal Bridle Work?**

Once the bridle tubing is passed through both nostrils and around the vomer bone, it uses the structure of the nasal cavity, specifically the vomer bone, to hold the feeding tube in place. If patients pull on the tube, they will feel a little pressure on the bone, making the bridle uncomfortable for a moment, but not painful. This deters them from continuing to pull on the tube. The goal is to secure the nasal tube in place without causing any damage.

The AMT Bridle™ Family may reduce the risk of complications from using a feeding tube without damaging the nose or causing pain to the patient. It deters pulling and also helps to prevent accidental dislodgement of the feeding tube, giving the patient more freedom to move normally.

With a device like the AMT Bridle™ or Bridle Pro®, there is no reason to tape or suture the feeding tube into place. This cost-effective AMT Bridle™ Family is barely visible and takes only about a minute to properly place. Through better tube securement the patient will experience enhanced nutrition and fewer complications like aspiration or sinusitis. Use of the AMT Bridle™ Family can dramatically reduce the occurrence of accidental tube dislodgement, avoid skin breakdown and lead to cost savings. It is a superior solution to prevent nasal tube dislodgement.
Clinically Proven for Both Pediatrics and Adults

Routine bridling has become the standard of care for many ICUs due to improved nutritional outcomes and cost management. Rather than restrict bridling to suspected “problem” patients, the cost savings should result in universal use on all nasal tubes: Every Tube, Every Time!

“Based on our experience we enthusiastically encourage placement of the umbilical tape bridle via the magnet system”


“The AMT Bridle novel technique offers relatively easy and quick placement without sedation.”

“We conclude that bridling of nasoenteric feeding tubes provides a safe and effective method of decreasing unintended tube dislodgement and optimizing nutritional delivery in [pediatric] patients.”


CLINICAL REFERENCES

The Importance of the AMT Bridle™ Family

Consistent nutrition support plays an important role in the management of nutritional deficiencies and is part of the standard of care for critically ill patients. The AMT Bridle™ system dramatically reduces feeding tube pullouts, resulting in an improved caloric intake. It is critical to maintain nasal tube securement in the neonatal and pediatric populations to ensure essential nutrition delivery to their growing bodies and avoid unnecessary nasal tube replacements. Conventional methods of tube securement using tape often lead to premature pullouts, dislodgement, and skin breakdown. For pediatric patients, AMT recommends placing the Bridle device prior to any nasal tubes.

Risks of Securement with the Alternative Method:

- Marginal adhesive effectiveness
- Skin breakdown

Benefits of the Bridle Family Securement Method:

- FDA Cleared for pediatric use
- FDA Cleared for use with ANY brand of nasal tube
Dislodgement of nasal tube  
Allergic reaction due to adhesive  
Nasal septal damage

Inadequately secured nasal tubes expose patients to risks including:

- Aspiration  
- Pneumothorax  
- Radiographic exposure  
- Early and unnecessary transition to PEG/TPN  
- Sinusitis  
- Pressure necrosis  
- Interruptions to nutritional support  
- More frequent replacement procedure

Available in sizes to secure nasal tubes as small as 5F  
MR safe after proper placement  
No patient sedation required

The Bridle Family of Devices is a Safety Device:

- Specifically designed by a physician  
- Manufactured by AMT, the inventors of the AMT Bridle™ technology  
- AMT has over 15 years of bridling product experience  
- Device secures around the strong vomer bone  
- Device strength and retention designed for patient safety  
- All device components will release or break well below the amount of force needed to cause injury

What is the Vomer Bone?

The nasal bridle is kept in place by the strong vomer bone, which is a mid-skull bone forming part of the nasal septum. This natural structure creates the division between the two sides of the nasal cavity, establishing a natural anchor point within the body.

The vomer bone begins formation at 8 weeks' gestation, is fully formed as a bone by 18.5 weeks' gestation, and is ossified at birth. This allows for patients of all ages to be safely bridled with the AMT device.

Patient safety and comfort are a top priority for AMT and this cranial structure is a great securement location for nasal tubes. Once the AMT Bridle™ or Bridle Pro® is properly placed, no tape or sutures are required to keep the nasal tube secured, allowing for patients to be more comfortable.

Alternative feeding tube securement methods expose patients to potential risks, but looping one of the AMT Bridle™ systems around the vomer bone with magnetic technology provides safe securement, ultimately keeping the nutritional support intact.

Bridle Pro® Innovations

There are several new elements to the Bridle Pro® system: Pro Range Clips, Pro Clips, and Blue Bridle Tubing.

Pro Range Clips:

- Can accommodate more than one French size of nasal tubes  
- Available in 5-6F, 8-10F, 12-14F, and 16-18F  
- Rigid inner portion of the clip is strong, secure, and easy to close  
- Soft over-molded portion increases patient comfort, especially in pediatric patients  
- Clip comes pre-attached

Pro Clips:

- A wide variety of French size specific clips, ranging from 8F to 18F  
- Can accommodate the large Salem Sump® tubes  
- Clip comes pre-attached
Blue Bridle Tubing:

- Monofilament tubing
- Softer, smoother, and more comfortable for the patient during and after placement
- Lubricant is no longer necessary, but lubricant or water may be used if desired
- Approximately 60% decrease in surface area when compared to umbilical tape
- Tubing is easy to clean

AMT Bridle Pro® Educational Video

The AMT Bridle™ Family is easily placed by passing magnets within the nasopharynx, which allows the bridle tubing to be looped around the vomer bone, and then anchored to the tube with a clip.

- Placed in less than a minute
- No patient sedation required
- A wide variety of French size clips to accommodate both pediatric and adult populations
- Secured without messy adhesive tape or sutures

Quick Reference Guide for the AMT Bridle Pro® System
The AMT Bridle Pro® is easily placed using magnets to draw bridle tubing through the nasopharynx; in one nare, around the vomer bone, and out the other nare, then securing it to the nasal tube with a French Size specific clip. AMT has provided this information as an educational resource. Do not attempt to use the AMT Bridle Pro® without also reviewing the product’s complete Directions for Use (DFU).

**Part Numbers & Ordering Information**

**AMT Bridle™**

The AMT Bridle™ system consists of a retrieval probe, a flexible white catheter which houses a removable stylet guide, a pre-attached clip, a clip opening device, and a packet of water-soluble lubricant.

**AMT Bridle Pro®**

The Bridle Pro® system consists of a retrieval probe, a flexible monofilament bridle catheter (bride tubing) which houses a removable stylet guide, a pre-attached clip, a clip opening device, and a packet of water-soluble lubricant.
### AMT Bridle Device

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### AMT Bridle Spare Clips

### Bridle Pro Device

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### Bridle Pro Spare Clips

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**Frequently Asked Questions**

AMT has provided this information as an educational resource tool. This is not intended as a substitute for professional medical care. Your **FIRST** source of information should be your healthcare provider.

**All**

- WHAT ARE THE MAIN DIFFERENCES BETWEEN THE AMT BRIDLE AND THE BRIDLE PRO?
- WHAT ARE THE MAIN DIFFERENCES BETWEEN THE BRIDLE PRO RANGE CLIPS, BRIDLE PRO CLIPS, AND AMT BRIDLE CLIPS?
- CAN THE AMT BRIDLE FAMILY OF DEVICES BE USED WITH PEDIATRIC PATIENTS?
- HOW DOES THE AMT BRIDLE FAMILY OF DEVICES SAVE MONEY FOR THE PATIENT AND HOSPITAL?
- IS THERE AN INCREASED RISK OF INFECTION OR SINUSITIS WITH THE AMT BRIDLE FAMILY OF DEVICES?
- WILL THE AMT BRIDLE FAMILY OF DEVICES DAMAGE THE NASAL SEPTUM?
- WHAT HAPPENS IF THE PATIENT PULLS ON THE BRIDLE DEVICES?
- HOW LONG CAN THE BRIDLE DEVICES STAY IN PLACE?
- WHY SHOULDN'T I USE A "HOMEMADE" BRIDLE?
- WHAT IS THE SAFETY RECORD OF THE AMT BRIDLE SYSTEMS?
- WHY CAN'T THE AMT BRIDLE SYSTEMS BE RE-USED?

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**More Questions? Ask Us!**

Name *

Email *

Phone

Questions *

CONTACT US
WILL THE AMT BRIDLE SYSTEM MAGNETS DISTURB A PACEMAKER?

IS THE AMT BRIDLE FAMILY OF DEVICES MR SAFE?