DIAGNOSTIC ULTRASOUND

Diagnostic Ultrasound Corporation, Maker of GlideScope® Video Laryngoscopes, Introduces New Rigid Stylet for Fast, Easy Endotracheal Intubation

Bothell, Wash., June 8, 2006—Diagnostic Ultrasound is pleased to introduce a new rigid, reusable stylet to facilitate fast, easy endotracheal intubations. Designed specifically for use with the GlideScope® Video Laryngoscope, the rigid stylet conforms to the GlideScope® blade shape (a patented design to improve airway view) and eliminates the need to manually shape the stylet to fit down the airway, an important factor during time-critical endotracheal intubations.

The GlideScope® rigid stylet is easy to use, learn and teach. It is also cost-effective. Unlike other stylets, the new rigid stylet, made of stainless steel, is reusable and can be cleaned easily along with other surgical instruments, using an autoclave. The rigid stylet is available in a convenient 6 pack.

"The advanced design of the rigid stylet and its ease of use are important advantages in challenging airway situations," said Dr. Jack Pacey, vascular surgeon and inventor of the GlideScope®.

Designed for "1st Pass Success," the GlideScope® Video Laryngoscope (GVL™) assists with anesthesia intubations in surgery and in the ER. Developed to make the passage of a breathing tube into the airway during anesthesia safe, reliable and easy, GlideScope®, which does not require "line of sight" for view and takes less force to position, is a significant improvement over the traditional direct laryngoscope widely used for this purpose.[i] With its patented 50 to 60 degree viewing range, integrated camera, and patented anti-fogging mechanism, GlideScope® enables visual control of the endotracheal tube in its trajectory toward the airway. The GlideScope® micro-video technology provides a clear picture of the larynx and vocal cords on a display monitor, further assisting proper endotracheal tube placement. The new rigid stylet was designed to make intubations with the GlideScope® even faster and easier.

An estimated 40 million anesthesia procedures are administered each year in the United States[ii], and in many of these cases it is necessary for anesthesia and emergency specialists to place an endotracheal tube to control respiration. Traditional direct laryngoscopes require "line of sight" viewing that will induce neck flexion, head extension, laryngeal depression and other movements that can cause stress to patients.

About Diagnostic Ultrasound

Diagnostic Ultrasound advances patient care by making innovative medical technologies and devices easy to use and more accessible to healthcare providers. Founded in 1984, the company has grown from a small start-up venture to a thriving and profitable international corporation. Diagnostic Ultrasound acquired Saturn Biomedical Systems, maker of the GlideScope® Video Laryngoscope, in January 2006. Diagnostic Ultrasound's noninvasive BladderScan® bladder volume instrument is the standard of care for bladder volume measurement in Urology and Acute Care.

Experiencing double-digit growth in 2005, Diagnostic Ultrasound was recently ranked among the fastest growing technology companies in Washington State in Deloitte's prestigious "Technology Fast 50" program. Diagnostic Ultrasound, with over 200 employees worldwide, is headquartered in Bothell, Washington. Saturn Biomedical Systems, a wholly owned subsidiary of DU, is located in Vancouver, Canada. For more information, please visit www.dxu.com.

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[i] *Cooper, RM.* Cardiothoracic Anesthesia, Respiration and Airway; Early clinical experience with a new videolaryngoscope (GlideScope®) in 728 patients. Canadian Journal of Anesthesia 2005; 52: 2: 191-198; *Sun D.A, Warriner C.B, Parsons D.G, Klein R, Umedaly H.S, Moult M.* Respiration and the Airway. The GlideScope Video Laryngoscope: randomized clinical trial in 200 patients. British Journal of Anesthesia 2005; 94: 381-384.

[ii] Amereican Society of Anesthesiologists, http://www.asahq.org/patientEducation.htm. Accessed Jan. 11, 2006.