



One805 Grant Application 2025

DEPARTMENT

Santa Barbara County Fire Department

Applicant Information: A brief presentation by the applicant or other person familiar with this request may be required.

Name Jennie L Simon, RN

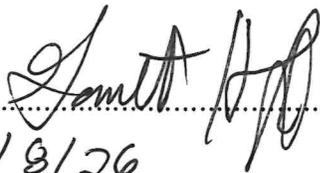
Title Emergency Medical Services Administrator

Contact Number 805 896 6332

Email jesimon@countyofsb.org

Chain of Command approvals (if applicable):

Applicants Commanding Officer

Print name Chief Garrett Huff **Signature** 

Date 1/8/26

President / CEO of organization **Print name**NA.....

SignatureNA.....

DateNA.....

1. Name and brief description of item or safety initiative: Please feel free to attach additional materials that will help us understand the grant request and its benefit.

We seek donor support to equip our emergency response teams with 26 UESCOPE® VL460 video laryngoscopes. Video laryngoscopy (VL) enhances visualization during airway management and improves first-pass success (FPS) rates, which directly affects patient outcomes in time-critical prehospital and emergency settings. The UESCOPE VL460 provides a compact, durable, and high-definition video platform with infection-control features ideal for EMS deployment. These devices and the associated training will be provided to all Advanced Life Support (ALS) fire departments in the county including Santa Barbara County Fire, Montecito Fire and Carpinteria-Summerland Fire. Please see additional information in attached original proposal provided to Mr. Craig Taylor.

2. Cost and source (include sales tax and shipping costs): As a public charity, One805 must purchase the item or fund the program directly. We do NOT grant funds to a non-profit or organization. Vendor's written quote/estimate must accompany the application and should be valid through January 31st of the following year.

- VL460 Units (26) @ \$1,966.50 = \$51,129.00
- Disposable Blade Packs (3) = \$3,013.00
- Estimated Total: \$54,141.00

3. Is a Board or Legislative Body approval required?

Yes, the Santa Barbara County Board of Supervisors must authorize receipt of the funds.

4. Describe the problem that your grant request addresses and how public safety will be enhanced across Santa Barbara County (Feel free to attach additional, related information):

In the prehospital environment, securing the airway rapidly and safely can be lifesaving. Studies have consistently shown that video laryngoscopy improves visualization and increases FPS compared to direct laryngoscopy. Adopting the VL460 will:

- *Improve FPS and reduce hypoxia and trauma associated with multiple intubation attempts.*
- *Support skill development through onboard recording and playback features.*
- *Standardize training and QA processes for airway management.*

5. Media Release: Please write and sign a statement allowing One805 permission to use and release approved photos and videos to the media for awarded grants.

Please see attached

6. Impact study: Could you please submit a few sentences about how last year's grant had an impact on your services.

NA



Proposal to Fund 26 UESCOPE® VL460 Video Laryngoscopes & Blades

Executive Summary

We seek donor support to equip our emergency response teams with **26 UESCOPE® VL460 video laryngoscopes**. Video laryngoscopy (VL) enhances visualization during airway management and improves first-pass success (FPS) rates, which directly affects patient outcomes in time-critical prehospital and emergency settings. The UESCOPE VL460 provides a compact, durable, and high-definition video platform with infection-control features ideal for EMS deployment.

Need & Impact

Why it matters: In the prehospital environment, securing the airway rapidly and safely can be life-saving. Studies have consistently shown that video laryngoscopy improves visualization and increases FPS compared to direct laryngoscopy. Adopting the VL460 will:

- Improve FPS and reduce hypoxia and trauma associated with multiple intubation attempts.
- Support skill development through onboard recording and playback features.
- Standardize training and QA processes for airway management.

Product Overview: UESCOPE® VL460

- **Display:** 3-inch LCD touch-screen monitor.
- **Blades:** Single-use system (sizes D0-D4, MAC options available).
- **Design:** Lightweight and ergonomic; ideal for EMS and field environments.
- **Features:** Auto-recording, Wi-Fi capable, 200-minute battery, 32GB memory (~16 hours of video).
- **Infection Prevention:** Disposable blades and optional handle covers reduce contamination risk.

Official Product Brochure (PDF): [UESCOPE VL460 Brochure](#)

Product Page: [UESCOPE VL460 Video Laryngoscope](#)



FDA Clearance

The UESCOPE® VL460 is classified under **FDA product code CCW (Rigid Laryngoscope)** and designated as a **Class I, 510(k)-exempt device** under 21 CFR 868.5540. This means the device meets established performance and safety criteria for laryngoscopes and does not require individual premarket notification.

Demonstration Videos

- [UE Video Laryngoscope Demo](#)
 - [UESCOPE VL460 for Users on Vimeo](#)
-

Evidence Supporting Effectiveness

1. UESCOPE Device-Specific Research

- Comparative trials of UESCOPE devices (VL-400 and VL460) demonstrate improved laryngeal view and FPS compared to Macintosh laryngoscopes, particularly in simulated and difficult airway scenarios (Kim et al., *Medicine*, 2024).

2. Prehospital Video Laryngoscopy Studies (2019–2025)

- **UK Prehospital Cohort (2025):** Demonstrated improved intubation quality metrics with VL versus DL in prehospital tracheal intubations (Davis et al., *BJA Open*, 2025).
- **Out-of-Hospital Cardiac Arrest (OHCA) Study (2023):** Showed higher FPS rates with VL in OHCA patients compared to DL (Horiuchi et al., *Resuscitation*, 2023).
- **Air Medical Comparison (2024):** Noted higher FPS in air medical providers using VL devices compared to DL, especially among paramedics with limited exposure (Miller et al., *Air Medical Journal*, 2024).
- **DEVICE Trial (NEJM, 2023):** Large multicenter RCT showing significantly higher first-attempt success with video laryngoscopy compared with direct laryngoscopy in emergency/ICU settings.

Summary of Evidence

Video laryngoscopy improves airway visualization, reduces esophageal intubations, enhances FPS, and facilitates provider training. Its benefits are most pronounced in prehospital and emergency environments with variable lighting and patient positioning challenges.

Internal Selection Process

- **Timeframe:** Evaluations and equipment trials within Department from June 2022 until device selection in May 2025.



- **Methods:** Utilized hands-on trials by Medical Director and end users with narrative feedback, and standardized Medical Product Evaluation Forms.
- **Final Selection Criteria:** Clear visual field with minimal humidification issues, ease of use, ability to capture and store data in HIPAA compliant manner, cost effectiveness, sturdiness in field environment

Budget Estimate for 26 Units

Item	Quantity	Unit Price	Subtotal
UESCOPE® VL460 Video Laryngoscope	26	\$1,966.50	\$51,129.00
Single-Use Blades (Box of 20)	3 boxes	\$1,004.00	\$3,013.00
Carry Cases and Chargers	26	Included	-
Total Estimated Investment			\$54,141.00

Note: Pricing based on contracted distributor quote (Life-Assist).

Implementation and Training

- **Training:** In-service training using manufacturer resources and simulation labs.
- **Quality Assurance:** Recorded intubations enable peer review, physician review and continuous improvement.
- **Infection Control:** Disposable components ensure compliance with EMS infection prevention protocols.

Conclusion

This proposal requests funding for 20 UESCOPE® VL460 video laryngoscopes to improve patient outcomes, standardize airway management practices, and support clinical education. With donor investment, we can ensure our prehospital providers have access to the safest and most effective airway tools available.

Prepared by:

Santa Barbara County Fire Department
Jennie Simon, RN – EMS Administrator
10/30/25