

PARALLEL SESSION 6:

POCUS

TIME: 13:45 - 17:15



16:00 - 16:15

Airway Ultrasound: An Insight

Dr. Sachin Arbhi (India)

Senior consultant In Department Of Anaesthesia,
Ruby Hall Clinic, Pune

Abstract:

Airway emergency situations are still one of the most demanding and life threatening occurrences in anaesthesia, being on top of the mortality causes. Although advanced airway devices and better physical predictors of difficult airway have contributed to a reduced incidence, inadequate training and equipment unavailability still makes it a real possibility.

POCUS advancement in airway in the recent years has made airway evaluation and emergency airway management easier, acting as an adjunct to physical evaluation.

Airway US evaluation can be done in supine or sitting position, with both the Linear or Curvilinear probe (both in transverse or longitudinal orientation). It is essential to put minimal pressure to get best image to reduce discomfort to the patient. A grip by both hands gives better control.

We will consider the importance of Airway scan from caudad (tracheal rings) to the cephalad (tongue)

Most important situations would include Possible CVCI situations requiring prophylactic CTM marking and visualization of tube passage in Trachea/ oesophagus (in Cormack lehane class 4) preventing unnecessary wrong tube passage, ventilation and stomach insufflation.

CTM – cricothyroid membrane

AMI – Air mucosal interface

TACA – Thyroid – AMI – Cricoid – AMI

CVCI – cannot ventilate cannot intubate

The final presentation will include videos and pictures of the above.