

Cricothyrotomy:

Indication: inability to secure the airway by noninvasive techniques in a patient with impending or ongoing hypoxia. Considerations: marked obesity, trauma, deformity of the face and neck, macroglossia, edema, or hemorrhage in and around the airway.

Technique vertical skin incision and a No.4 Shiley (i.e. small) tracheal tube or 6-0 ETT

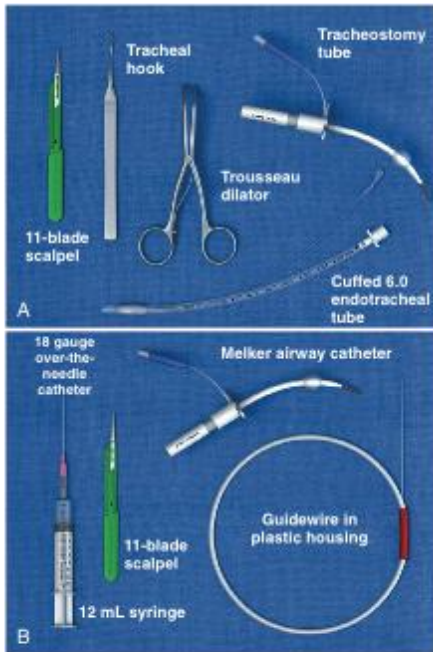
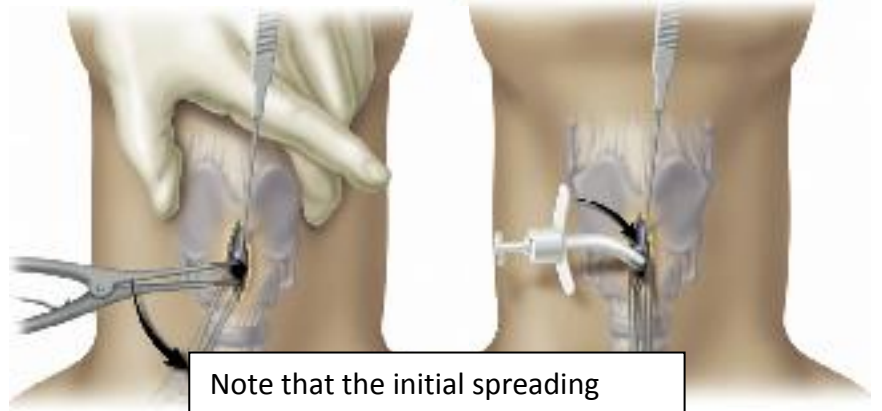


Figure 6-3 A and B, Equipment required for traditional surgical cricothyrotomy. Eighteen-gauge needles bent to 90° may be used in place of a tracheal hook. (A and B, From Thomsen T, Setnik G [eds]: Procedures Consult—Emergency Medicine Module. Copyright 2008 Elsevier Inc. All rights reserved.)



Note that the initial spreading motion with the Trousseau dilator is vertical, followed by a 90° rotation with a horizontal dilation as pictured.

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