AIRWAY Rx

D.1. Predictors
- Mallimpatti
- a-a extension - 30°
- t-m distance - 6 cm

Aids in D.1.
- usual - best position, assistance, blades, bougie, sucker, tilting table
  - fatties - pillows neck/shoulders
  - head up
- LMA
- FOI - elective
- awake intubation - .... antisialagogue
- blind nasal
Failed Intubation

- maintain oxygen
- keep pt asleep
- LMA next step
- cricothyroidotomy - last resort
- case urgent/elective?
- sux still #1 for RSI
- attempts to ↓ potency to ↑ speed
  - onset (faz, vec, roc)
  - still don't → sux
- ↑ risk 2 anaphylaxis or other histamine events
- what if you can't ventilate?
INHALATION vs TIVA

INHALATION

- pro - easy to titrate, monitor depth
- fast waking
- stood the test 1 time

- con - N/V
- pollution - 0.5-1%

TIVA

- pro - N/V
- low pollution
- good recovery

- con - harder
- monitoring
- cost
- ? toxicity long-chain TG
**N₂O**

**Pro**
- Analgesic
- Min Δ CBF, ICP
- Min dep VMC, resp
- Weak CVS dep solo
- Non-irritant
- No effect on liver, kidneys, adrenals, uterms, pectus, coagulation
- Low P<sub>2</sub>, cost
- Stable e soda-time, adrenaline
- Odourless, non-explosive
- Not metabolised
- Stable heart rhythm
- Can use often
- "Paramedic" use
- Time-honoured
- Relatively cheap

**Con**
- Emetic n 10?
- Can't use high F<sub>2</sub>O<sub>2</sub>
- Needs supplement
- Low BP in combo
- Gas cavities
- Marrow
- ? Slows healing
- Not portable
- 7 complexity anaes. fear
- Bad rap
- Fails 2007 entry

All well known and tolerated. Competitors have con's.
- **DRUGS**
  - fairly static
  - new: ropiv, L-bupiv.
  - ropiv? safer than bupiv (cvs)

- **NEURAXIAL**
  - narcotics
  - PCEA

- **BLOCKS**
  - less EDB → more blocks
  - nerve stim safe; low mt
  - ws ↑ popular

**COAG's**
- controversial

LA vs. GA
- elective CS - spinal > EAB
- fluid load ineffective
- infuse vasopressors
  - metaraminol 0.5 mg/ml 20-30 ml/hr
- ephedrine still popular
- incision-delivery time still impt.
- postop: - NSAID PR in OT
  - regular oral Panadol
  - narcotics
    - PCA
  - laxatives
- Cl to neuraxial
  - pr refusal
  - coagulopathy
  - infection/fever
  - V BP
  - (back, spine)
**Miscellaneous**

**PONV**
- we can effect
  - choice 2 anae.
    - IV > nas
  - choice 1 analgesia
    - opioids / tramadol
  - 5HT3 very good
  - steroids food in high risk
  - 1 AT E droperidol

**REMEmber** **LOCAL**

**Analgesics**
- COX-2 - high risk pts?
  - tramadol - N/v
    - epilepsy
    - serotonin synd.
  - IV Paracetamol - 1 dose only
  - NSAIDS - asthma, hypovolaemia, HT.
EQUIPMENT

Anaes. Machine
- pro - electronic monitoring, records
- con - not accurate
- con - still fail
- con - expensive

Syringe Swap
- rare, serious
- labels - complex cognitively
- red for relaxants
- barcode
- shop amp to syringe
- use minimal number