SAWA UNIVERSITY

جامعة ساوة الاهلية
كلية التقنيات الصحية والطبية
قسم التخدير - اللجنة العلمية

أسس أجهزة التخدير الكورس الاول

Laryngoscope

جامعـــــــة ســـــــــاوة الاهلية — Sawa University

كليـــــة التقنيـــات الصحيـة والطبيـة — College of health and medical techniques

قسم تقنيـــات التخديـــــــر — Department of Anesthesia

.....المرحلـــــــــــــــة الثانية — .....second..... Stage

استاذ المادة د. حسن جساب البركي

محاضرة رقم9

نظـــــري

Theoretical

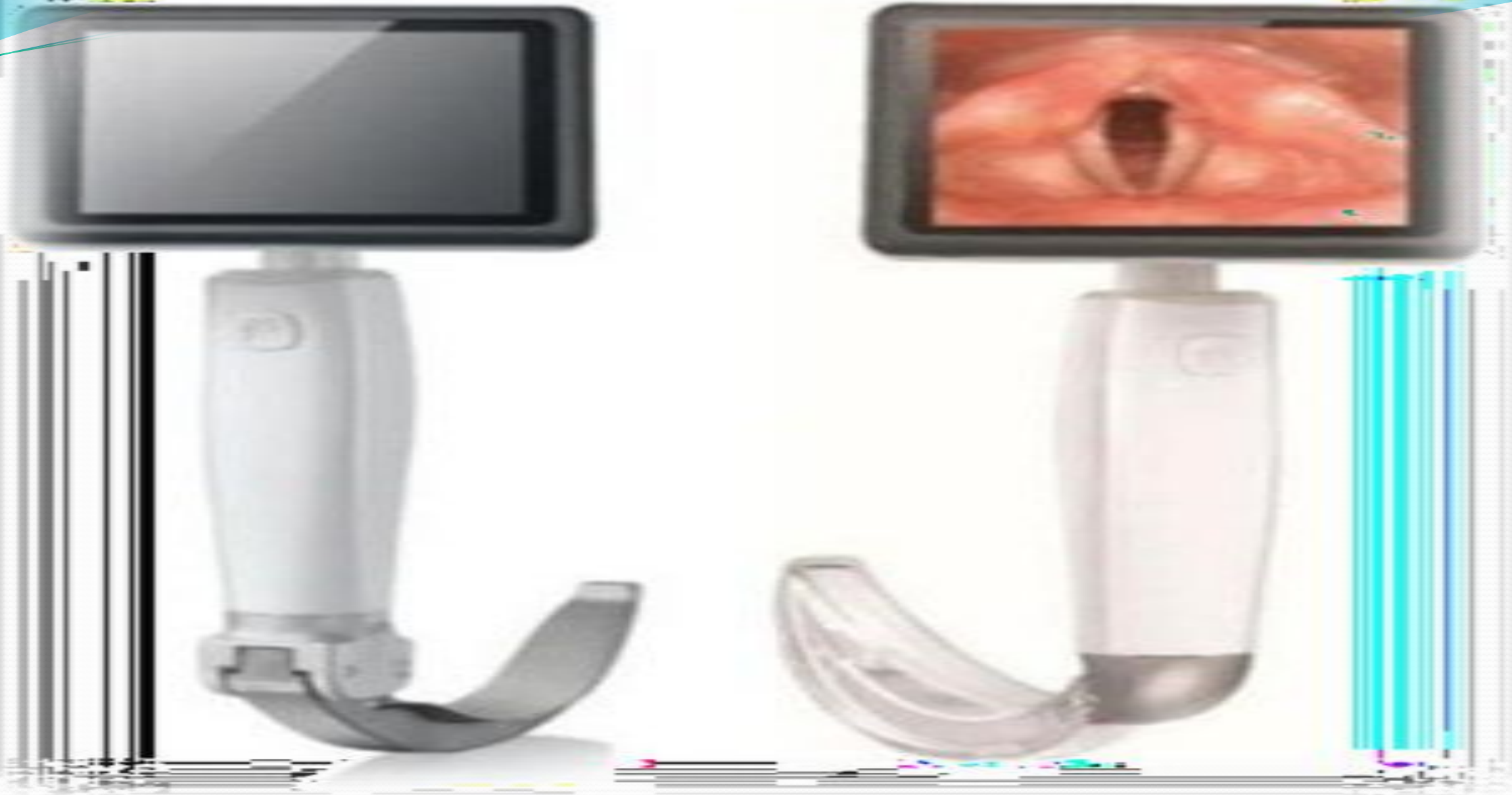
Lecture No 9

? What is the Laryngoscopy

- is endoscopy of the larynx, a part of the throat.
- It is a medical procedure that is used to obtain a view, for example, of the vocal cord and the glottis.

- Laryngoscopy may be performed to:

1. facilitate tracheal intubation during general anaesthesia or cardiopulmonary resuscitation
2. or for surgical procedures on the larynx or other parts of the upper tracheobronchial tree.



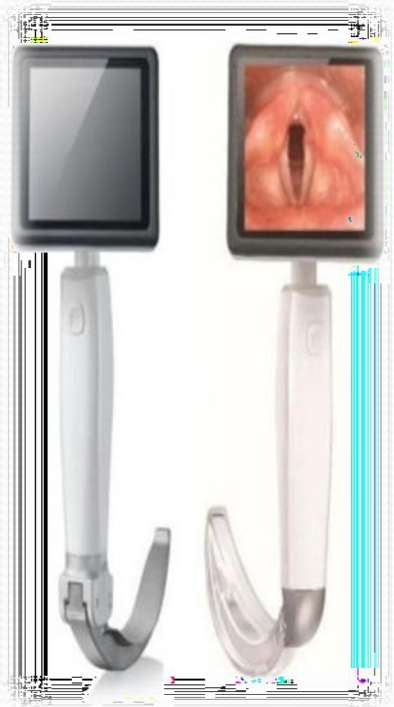
LARYNGOSCOPE

Laryngoscopes: These devices are used to perform direct laryngoscopy and to aid in tracheal intubation.

Type of laryngoscope:

1. Direct laryngoscopy
2. Indirect Laryngoscopy

- Optical Stylets
- Rigid Fiberoptic Laryngoscopes
- Rigid Video Laryngoscopes

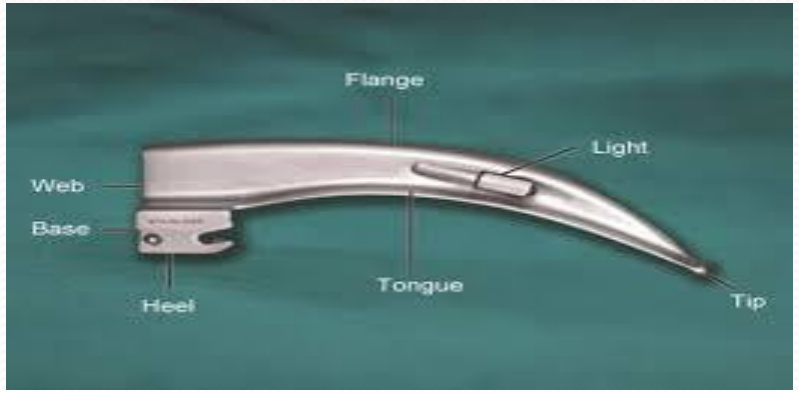


:Components

1.The handle houses the power source (batteries) and is designed in different sizes.

2.The blade is fitted to the handle and can be

their curved or straight. There is a wide range of designs for both curved and straight blades.



Types of Laryngeal blades

1_Macintosh blades :

2_Miller blades :

: McCoy blades.3

4._Polio Macintosh :

:MECHANISM OF ACTION

1. Usually the straight blade is used for intubating neonates and infants. There are larger size straight blades that can be used in adults.
2. The curved blade (Macintosh blade) is designed to fit into the oral and oropharyngeal cavity.

3. In the standard designs, the light source is a bulb screwed on to the blade and an electrical connection is made when the blade is opened ready for use. the bulb is placed in the handle and the light is transmitted to the tip of the blade by means of fibreoptics.

Macintosh blade is used in.4 patients with right-sided facial deformities making the use of the .right-sided blade difficult

Problems in practice and safety features

1. The risk of trauma and bruising to the different structures (e.g. epiglottis) is higher with the straight blade.
2. Reduction in power or total failure due to the corrosion at the electrical contact point is possible.
3. Patients with large amounts of breast tissue present difficulty during intubation. Insertion of the blade into the mouth is restricted by the breast tissue impinging on the handle. To overcome this problem, specially designed blades are used such as the polio blade.
4. To prevent cross-infection between patients, a disposable blade is used. Laryngoscope handles must be decontaminated between patients to prevent cross-infection

Complications of Laryngoscope :

.Laryngeal spasm .1

.2 Hypoxia due to delays in oxygenation while performing.2
.the procedure

.3 Trauma to the mouth or upper airway.3

.4 Exacerbation of underlying c-supine injuries.4

.5 Vomiting-regurgitation.5

Any questions?