

## SURGICAL CRICOTHYROTOMY

### INDICATIONS

Unable to protect the airway or manage oxygenation and ventilation with other airway procedures. The preferred procedure for infants and children age 10 and under is needle cricothyrotomy.

### PROCEDURE

1. In the adult patient, identify landmarks (remove front panel of C-collar, if present, while maintaining C-spine stabilization).
2. Cleanse the area with chlorhexidine or betadyne.
3. Make a generous (up to 2-inch) superficial midline vertical incision through the skin, over the expected position of the cricothyroid membrane.
4. Blunt dissect and expose the cricothyroid membrane.
5. Using a scalpel, incise the cricothyroid membrane transversely, long enough to allow for introduction of an endotracheal tube.
6. Introduce the Trach hook and rotate the handle toward the head of the patient, applying gentle traction. Ask your assistant to hold it and maintain vertical cephalad traction.
7. Place a bougie into the incision.
8. Advance an endotracheal tube or tracheostomy tube over the bougie into the trachea to the depth indicated by the black mark on the tube. (Make sure all the air is withdrawn from the cuff prior to placement to avoid a ballooning of the cuff as it is passed into the trachea.)
9. Confirm placement.
10. Have your assistant pass the handle of the Trach hook to you and remove gently.
11. Appropriately secure the tube.
12. Reapply cervical collar, if c-spine precaution is necessary.