气管插管术

# 气管插管

- 经口气管插管
  - 1. 明视经口气管插管(常用)
  - 2. 盲目经口气管插管
- 经鼻气管插管
  - 1. 明视经鼻气管插管
  - 2. 盲目经鼻气管插管



# 两种气管插管方法的比较

			经鼻气管插管
			长, > 7天
I Water			内径小,长
			较易耐受
	护理难易	较容易	较困难

# 两种气管插管方法的比较

- 经口气管插管
  - 易操作
  - 易移位
  - -<72小时
  - 难护理(口腔)

- 经鼻气管插管
  - 易耐受、固定、便 于口腔护理
  - -操作不易
  - 鼻出血
  - 鼻窦炎

# 经口气管插管的步骤

• 气道评估

主要目的是了解是否存在困难气道

- 麻醉处理
- 气管插管及固定



# 气道评估的依据

- 张口度
- 头颈部活动度
- 牙齿和上、下颌骨
- 甲—颏间距离
- 口腔和咽喉部是否有新生物
- 实验室检查

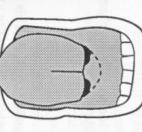


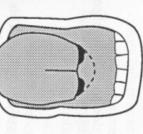
# Rapid Sequence Induction

### Whitten; Anyone Can Intubate

Moderate difficulty

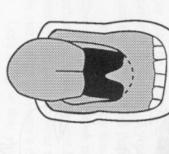
of uvula visible Class III: soft palate, base



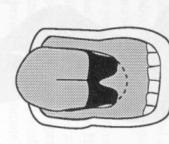


only visible Class IV: hard palate

Severe difficulty

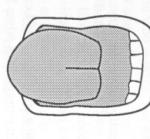


Class I: soft palate, uvula, No difficulty fauces, pillars visible

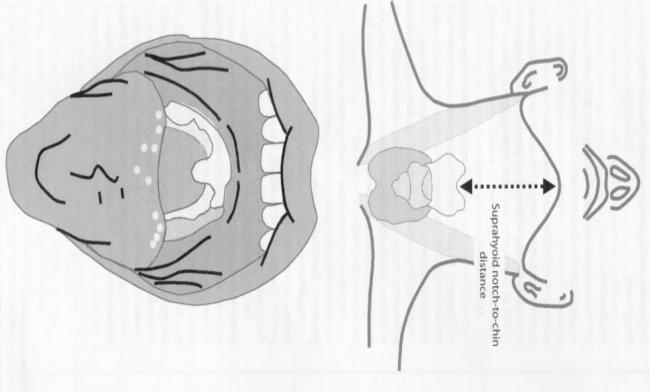


fauces visible Class II: soft palate, uvula,

No difficulty



### McIntyre; The difficult tracheal intubation



Teeth long	Cleft lip/palate	Tongue large	View of fauces poor	Intra-oral cavity small	Width of mouth narrow	Mouth opening limited	
	der columbia sen di						Yes
				198			No

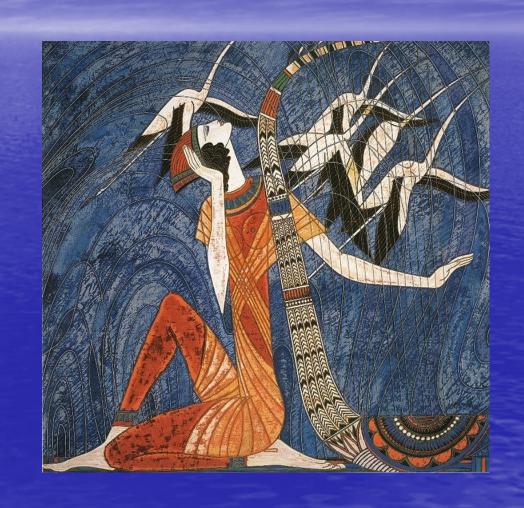
Neck swelling	Trachea deviated	Suprahyoid notch-to-chin distance < 6 cm	Submandiblar swelling	Submental swelling	Submental angle narrow	and proposition and the state of the state o
						res

# 解剖结构和插管难度的关系

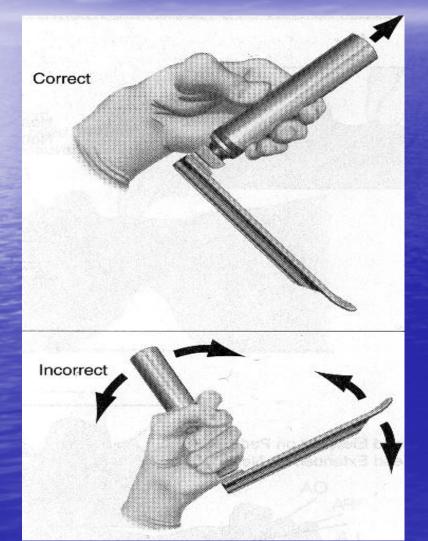
Mallampati评估	喉结高, 仅见硬腭
下颌脱位	<u> </u>
下颌骨长度	下颌角—下颏距离
寰枕关节的伸展度	气道病变:肿瘤
短颈 (如肥胖病人)	颞颌韧带钙化
上门齿前突	胸骨向前突出
颈椎弯曲度	巨舌
面部水肿	上、下颌骨骨折

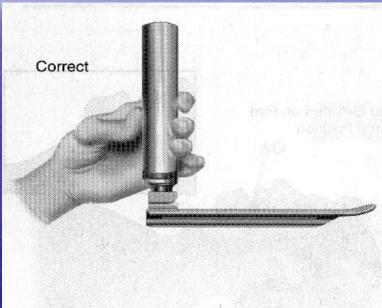
# 经口气管插管的麻醉

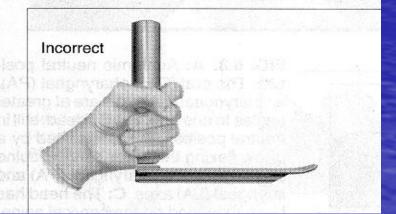
- 局部麻醉
  - -局部浸润
  - -表面麻醉
- 全身麻醉
  - -静脉快速诱导
  - -吸入麻醉



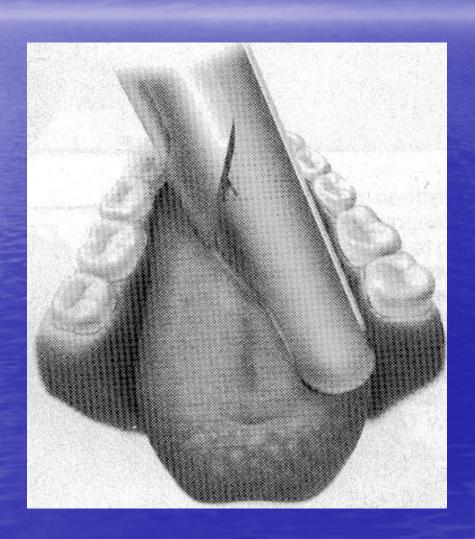
# Laryngoscopy







# Laryngoscopy



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