

✓
CODE: A13
Question: Airway

Type:

Author: Dr. B. Milne

Opening Scenario:

18 year old goalie wearing no neck protection hit by puck, slap shot in neck. Slumped to ice. Brought by ambulance to Emergency. Now unconscious, cyanotic, laboured breathing, swollen neck, and blood from mouth.

Major points of additional information to be provided to the candidate, e.g., hx, px, labs, x-ray, consults:

- Jaws clenched shut
- SpO₂ - 47% on 100% oxygen

Major decision points (major decision points or options which must be recognized by the candidate)

- Problems with securing airway urgently in patient with abnormal anatomy (fractured thyroid, cricoid, etc.)

Any followup information required to lead to the end of the question

- Once intubated, difficulty with ventilation, SpO₂ 81%.
- Patient has bilateral pneumothoraces and negative pressure pulmonary edema.

100% O₂, Aspiration, Endotracheal, secretion, pelvic contusion, foreign body, 1st degree burn.

Critical features to be included i.e. the *must* have to pass the question or to be considered *completely unacceptable*

- Definitive plan for securing airway recognizing sequelae of upper airway obstruction.

Ref: RCCEXAMAT.FORM June, 95
USED:

ABCDE

Trach

C-spine → go ahead without clearance but with in-line stabilization

Sug A/W or your A/W.

Intubation → 2-large bore IVs.