

Success in Difficult Airway Managements with Video Laryngoscope After Two Failures in Intubation with Macintosh and McCoy Laryngoscope: A Case Report

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Abstract

Introduction: Currently, creating a secure airway for general anesthesia is an integral part of the process of anesthesia. The difficulty of this process effects morbidity and mortality rates. In order to achieve further success in these patients, it is advised to use video laryngoscope.

Case Presentation: The patient was a 45-year-old female, who was a candidate for cholecystectomy along with laparoscopic surgery, and had referred to Peimaniyeh hospital of Jahrom, Iran, during September 2016. In the initial assessment, the patient seemed to be in a difficult airway class, while in her surgery documents from 5 and 10 years ago and in her previous records no history of this problem was mentioned. After the administration of drugs before surgery and anesthesia induction, tracheal intubation had failed by use of routine laryngoscope and McCoy laryngoscope in two stages. Finally, the use of video laryngoscope for tracheal intubation was successful. During the intubation attempts, the patient was ventilated with 100% oxygen mask and her arterial blood oxygen saturation had not decreased.

Conclusions: Therefore, it is recommended for the patient to be investigated carefully in terms of airway management. In addition, in case of difficult intubation, selecting video laryngoscope to facilitate intubation may be appropriate. The mere absence of a difficult airway management is not a reason that the problem will not occur in the future.

Keywords

General Anesthesia; Airway Management; Intubation; Video Laryngoscope; Macintosh; McCoy Laryngoscope