

# PERCUTANEOUS CRICOTHYROTOMY

## Why?

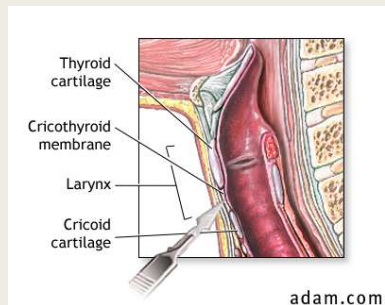
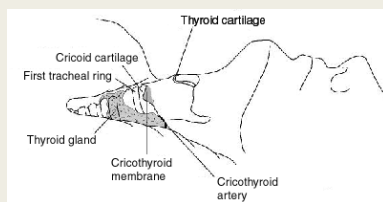
- Can't Ventilate, Can't Intubate
- Congenital deformities????
- Trauma to the head or neck which would preclude the use of ETT via nasal or oral passage
- Cervical spine fractures and tracheostomy is not fast enough?

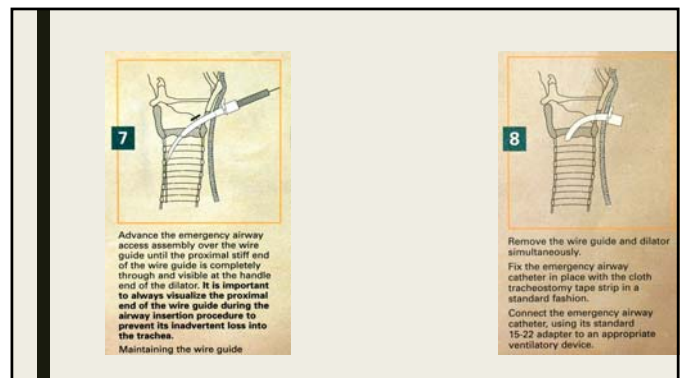
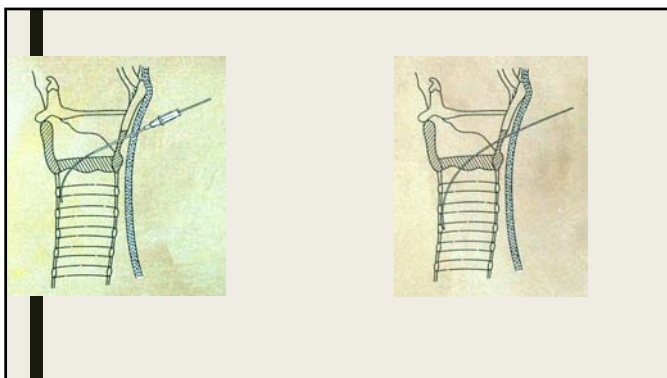
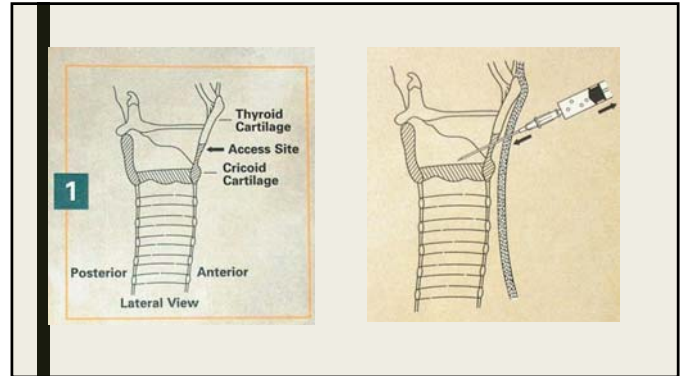
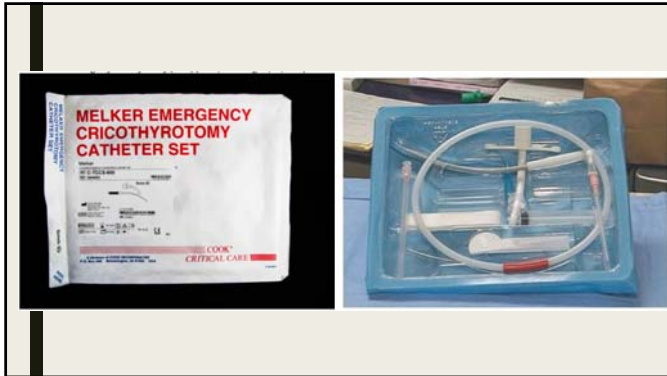
## Advantages

- Provides a definitive airway
- Can be performed quickly and has relatively few complications

## Contraindications

- Patient < 40 kg and < 10 years old
- Suspected fractured larynx
- Inability to localize the cricothyroid membrane





### Converting from Cricothyrotomy to Tracheostomy in trauma patients

- Controversy surrounds whether to expeditiously convert emergency cricothyrotomy to tracheostomy
- Conversion advocated by many authors to decrease incidence of subglottic stenosis
- Arch Surg 2010 (Review of literature from 1/1978 to 1/2008) - "Cricothyrotomy after trauma is safe for initial airway access among patients who require the establishment of an emergent airway. The prolonged use of a cricothyrotomy tube, however, remains controversial. Although no study to date has demonstrated any benefit of routine conversion to tracheostomy, considerable deficiencies in existing studies highlight the need for further investigations of this practice."