

Airway Assessment

LEMON

Look for...

Look at the patient's anatomy

- Oral cavity: loose, chipped, or capped teeth; crowns, bridges, dentures
- Tumours or obstructions to airway flow.
- Obese
- Large tongue
- Short bulk neck
- Abnormal facial/neck anatomy
- Hypognathic (recessed) jaw
- Hypergnathic (protruding) jaw
- Deviated trachea
- Protruding teeth
- High arched palate.

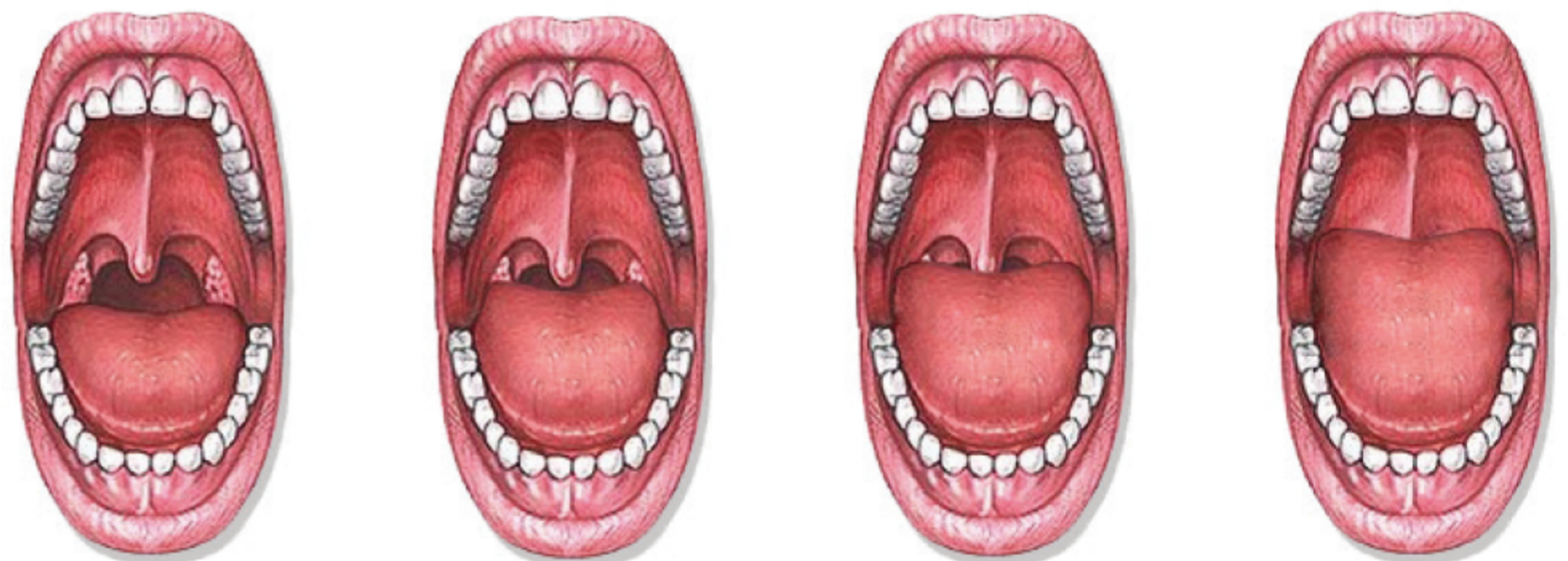
Evaluate 3,3,2 finger widths between:

1. Incisors
2. Hyoid and mentum
3. Hyoid and thyroid

1. Temporomandibular joint (interincisor distance): should be at least 3 finger width; limited range of motion? Pain?
2. Thyromental distance: should be at least 3 finger width
3. Should be at least 2 finger width

Mallampati score

With the patient in a sitting position, head in a neutral position and mouth opened as wide as possible. Patients with a higher Mallampati score tend to have poorer visualization during direct laryngoscopy.



Class 1

Soft palate, Fauces, uvula, pillars

Class 2

Soft palate, Fauces, portion of uvula, pillars

Class 3

Soft palate, base of uvula

Class 4

Hard palate only

Obstruction

- Foreign bodies
- Tumour
- Excessive soft tissue from obesity

Neck mobility

Atlanto-occipital movement: flexion, extension and side to side movement

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