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IMAGEM EM ANESTESIOLOGIA

Unconventional Approach to the Pediatric Airway After Maxillofacial Trauma

Abordagem Não Convencional da Via Aérea Pediátrica Após Trauma Maxilo-Facial

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Afiliação
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Palavras-chave
Anestesia; Child; Manuseio das Vias Aéreas; Traumatismos Maxilofaciais

Facial trauma is associated with severe obstructive complications of the airway. A 12-year-old was admitted to the emergency room after falling from a height of 12 meters, with spontaneous breathing, GCS 13. Visualization of the airway by videolaryngoscopy was not successful due to the hemorrhage and instability of the fractures (Fig.s 1 and 2). An unsuccessful attempt at cricothyrotomy followed, because the patient did not tolerate the positioning. After this, a percutaneous tracheostomy under inhalation sedation was performed successfully. Still, during the procedure, the patient went into ventricular fibrillation, which was promptly reverted by one cycle of advanced life support. In cases like this, it is important to know the various ways of approaching the airway, which is an ongoing challenge for any anesthesiologist.

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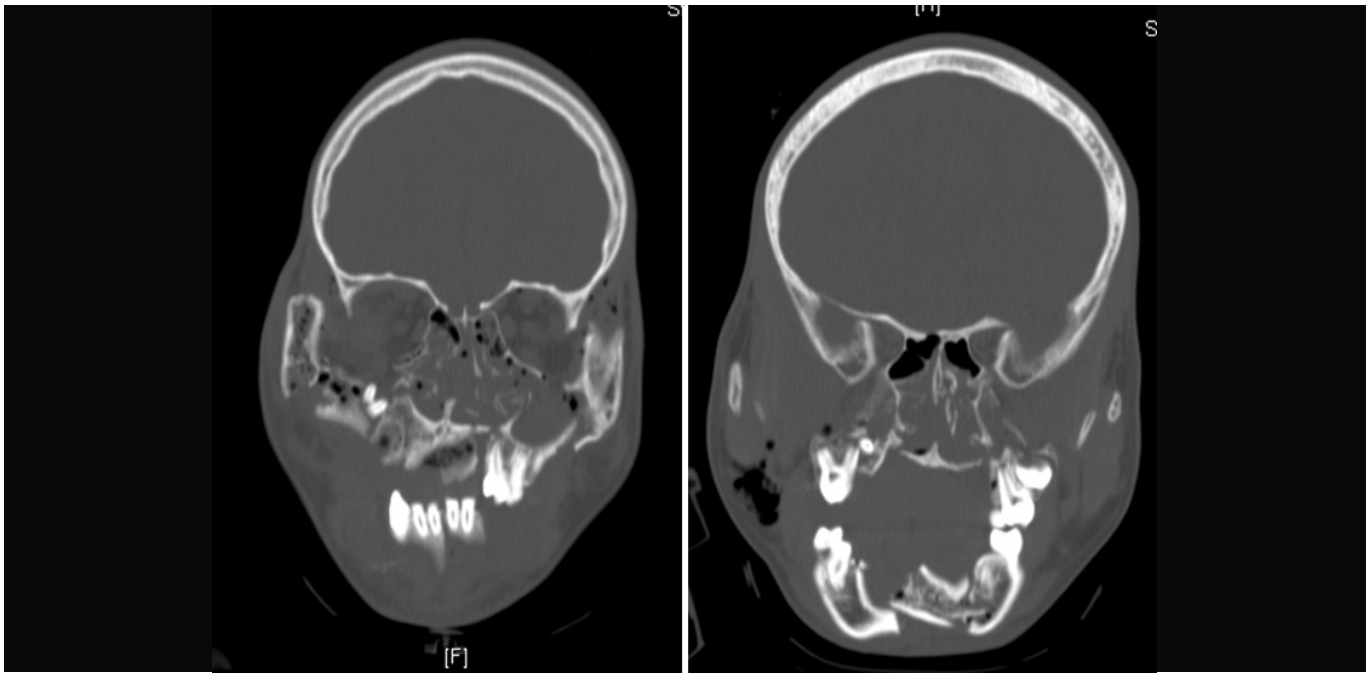

Figure 1. CT images skull performed

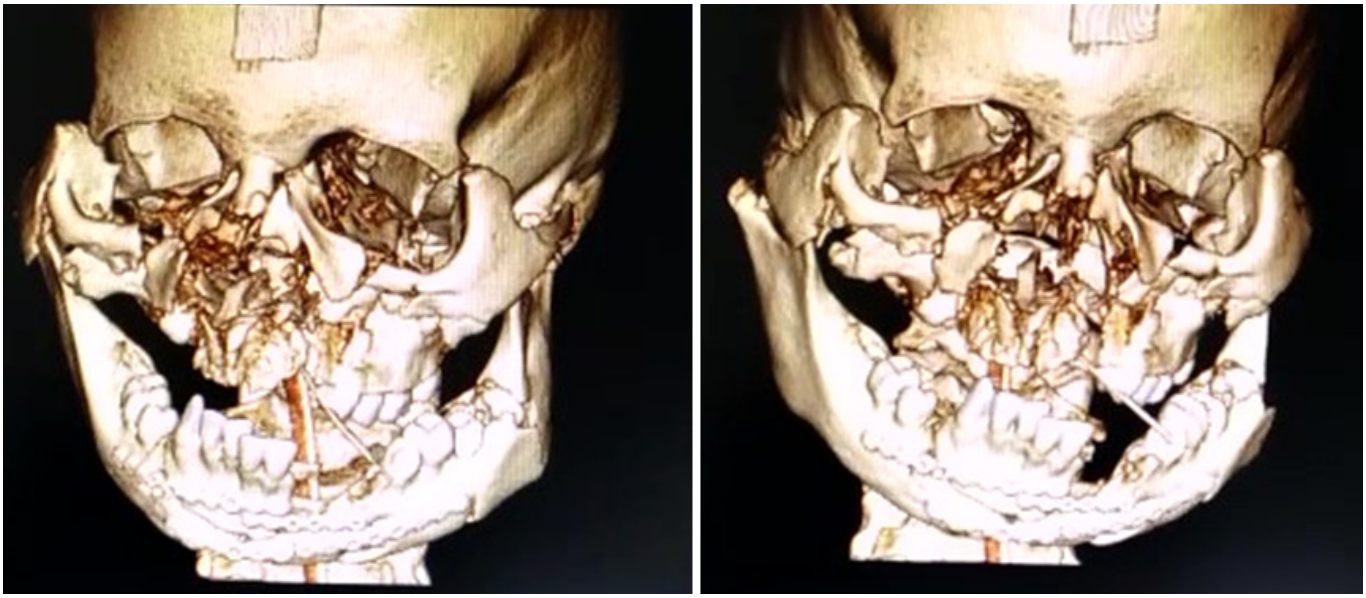

Figure 2. 3D reconstruction images of facial trauma