AIRWAY ASSESSMENT: LOOK - LISTEN - FEEL

Look

- Level of consciousness
- Mask misting
- $Sa0_2$
- Colour
- Breathing rate and depth
- Pattern of breathing

Listen

- For sounds of partial obstruction
- Snoring, gurgling, crowing or
- Total obstruction and **silence**

Feel

- For breath at mouth / nostril

SIGNS OF AIRWAY OBSTRUCTION

PARTIAL AIRWAY OBSTRUCTION

- Falling SaO_2
- Limited misting on mask
- Limited feel of air at nose/mouth
- Use of accessory muscles
- See-saw breathing
- Audible sounds: Snoring, gurgling, crowing
- Increase in heart rate/blood pressure
- Agitation

COMPLETE AIRWAY OBSTRUCTION

- Rapid fall in SaO_2
- **No** misting on mask
- **No** feel of air at nose/mouth
- Marked use of accessory muscles
- Obvious see-saw breathing
- **No breath sounds – SILENCE**
- Tracheal tug
- Tachycardia/hypertension/arrhythmias
- Acute agitation & distress

CALCULATE THE RISK OF YOUR PATIENT OBSTRUCTING

- **Has your patient undergone a GA? Unconscious state, loss of airway [weak muscles, floppy tongue]**
- **Has the patient been intubated?** [Laryngospasm if traumatic]
- **Trauma surgery?** [Risk of aspiration if not starved due to loss of epiglottal function]
- **Is your patient obese?** [Fleshy tissue, oral cavity : greater risk of obstruction]
- **Has your patient got loose teeth?** [Foreign body will block airway]
- **Is your patient a smoker –asthmatic – COPD?** [greater risk of lower airway obstruction – bronchospasm]

- **Surgery : dental / ENT surgery?** [risk of bleeding : spasm : throat or dental pack left in situ]
- **Surgery on larynx** [risk of damage, swelling to vocal cords]

- **The more risks, the greater the chance of airway obstruction**

i.e.

  - Elderly, obese patient, general anaesthesia, intubated with ETT, ENT surgery with high risk of bleeding = high risk of obstruction

- **Now examine your patient --- is the risk borne out?**