SNS COLLEGE OF ALLIED HEALTH SCIENCES
SNS KALVI NAGAR,COIMBATORE-35
AFFILIATED TO Dr MGR UNIVERSITY,CHENNAI

DEPARTMENT OF OPERATION THEATRE AND ANAESTHESIA TECHNOLOGY

3rd YEAR

SUBJECT:Principles of Anaesthesia II

TOPIC:Preparing Theatre

- Indications:

✓ DLT is used for one lung ventilation in surgeries such as
✓ Thoracotomy-pneumonectomy/lobectomy
✓ Minimally invasive cardiac surgery
✓ oesophageal surgery

- Tube selection:

✓ Robertshaw tube,available as both a L and R sided tube-most often left side tube is used
✓ Sizes include a 28f(peadiatric)as well as 32f,35f,37f,39f and 41f
✓ Choose the appropriate size depending on patients height & Sex

S:No	Sex	Height in cm	Size of DLT
1	Female	<160 cm	35f
2	Female	>160 cm	37f
3	Male	<170 cm	39f
4	Male	>170 cm	41f

- Confirm the size & side of the tube with the anaesthetic and check both the tracheal & bronchial cuff
- Calculate the length of the tube insertion
- Check
- Ensure the stylet is within the tube & goes upto the tip of the endobronchial lumen
- Make sure the catheter mount & clamp is available
- Laryngoscope & suction is available
- Two separate bowl with suction catheter marked L & R
- Fiberoptic bronchoscope with light source & cable for checking the position of the endobronchial tube.

- Procedure:

✓ The tube should be held with the bronchial curve facing anteriorly & when the bronchial cuff passes beyond the vocal cords,the stylet is removed and the tube rotated 90 degrees to direct the endobronchial part to the required site

✓ Connect the double catheter mount & connect the circuit

✓ Inflate the tracheal cuff

✓ The anaesthetist checks that both the sides are ventilating well

✓ Clamp the tracheal side of the adaptor & open the tracheal port distal to the clamp

✓ Inflate the bronchial cuff so as to just eliminate air leak from the tracheal lumen 3-5ml of air

- Auscultate to make sure air entry is heard only on the side of the endobronchial side
- Remove the tracheal clamp & close the port
- Clamp the bronchial limb & open the bronchial port
- Auscultate for breath sounds on the opposite side
- The anaesthetist will use fibreoptic bronchoscope to check the correct position of the endobronchial tube

THANK YOU