

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 for thoracic anaesthesia





- Select Appropriate Tube
- Choose based on patient's height and gender
- (e.g., 35–41 Fr for adults)
- Left-sided DLT preferred for most procedures



Equipment Preparation





- Stylet (inserted into bronchial lumen)
- Lubricant
- 10 mL syringes × 2 (for cuff inflation)
- Clamp (e.g., bronchial clamp)
- Fibreoptic bronchoscope (FOB)
- Suction catheters
- Airway securing materials (tape, tube holder)





Pre-insertion Checks

- Inflate both cuffs (tracheal & bronchial) to check for leaks
- Deflate completely before insertion
- Confirm patency of both lumens
- Lubricate the tube adequately





Insertion Technique

- Position patient in sniffing position
- Insert DLT with bronchial lumen anterior
- Rotate 90° towards intended bronchus when tip passes vocal cords
- Advance gently until resistance



Position Confirmation



- Inflate tracheal cuff first, then bronchial cuff
- Use fibreoptic bronchoscopy to confirm:
- Placement of bronchial lumen in correct main bronchus
- Check tracheal and bronchial lumens for proper alignment

Securing the Tube

- Fix tube firmly with adhesive tape
- Reconfirm position after any patient repositioning (especially lateral)





Ventilation Setup

- Connect appropriate limbs of circuit to tracheal & bronchial ports
- Clamp and ventilate one lung to confirm correct isolation
- Use OLV protocols as per surgery





THANK YOU