

CR#10

Experience with a patient having multiple gunshot wounds in combat

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A male patient revealed multiple **gunshot wounds to the chest, neck, arm and the left flank. Rapid sequence intubation** with cricoid pressure was planned. With the potential difficult intubation and airway swelling, the decision was made to use the Airtraq for its first combat trial test. The cervical spine with in-line stabilization was maintained. The ett introducer was advanced past the periglottic hematoma and atraumatically introduced. An 8.0-mm ett was placed over the introducer and advanced without difficulty.

In this potentially difficult airway (airway hematoma and cervical spine precautions) in a combat zone from multiple gunshot wounds to the neck, the Airtraq proved to be a life-saving device. The Airtraq allowed for full visualization of the cords without altering cervical spine traction. With this particularly difficult airway, the initial intubation attempt needed to be the optimal attempt.

It is our belief that the Airtraq, as an independent battery-operated device, is an invaluable tool for trauma airway settings.