

# The Airway Carnival: Rigid Fiberoptic Scopes

## Description:

These devices generally consist of an anatomically shaped blade, fiberoptic bundles and light source. They allow for visualization of the airway without manipulation of the head and neck.

## Indications:

- Endotracheal intubation
- Patients with limited mouth opening/reduced neck movement
- Difficult airways

## Contraindications:

- Lack of skill
- Lack of functioning equipment

## Advantages:

- Allows for visualization of the larynx with little or no neck movement and limited mouth opening
- May overcome difficult view
- Generally sturdy and durable instruments

## Disadvantages:

- Requires skill, some devices need light source
- Often best performed in the awake patient
- Wu scope™ requires considerable mouth opening

## Special Features:

- Use to visualize larynx without stress
- May perform jet ventilation via forceps channel

## Tips for Success:

- Neutral head position
- Use of a flexible guide or blade extender
- Practice, practice, practice!

## Currently available devices include:

- Bullard™ (Circon)
- Upsher™ (Mercury Medical)
- Wu™ (Pentax)

**References:**

1. Cooper SD, Benumof JL, Ozaki GT. "Evaluation of the Bullard Laryngoscope with the New Intubating Stylette: Comparison with Conventional Laryngoscopy." Anesth Analg 79:965, 1994.
2. Cohn AI, Zornow MH. "Awake Intubation in Patients with Cervical Spine Disease: A Comparison of the Bullard Laryngoscope and the Fiberoptic Bronchoscope." Anesth Analg 81:1283, 1995.
3. Watts DJ, Gelb AW, Bach DB, Pelz DM. "Comparison of the Bullard and Macintosh Laryngoscopes for Endotracheal Intubation in Patients with a Potential Cervical Spine Injury." Anesthesiology 87:1335, 1997.
4. University of Florida College of Medicine, Department of Anesthesiology website: [www.anest.ufl.edu](http://www.anest.ufl.edu)