TABLE

	Components	Descriptors	Assessment activities
M	Mandible	Length and subluxation	Measure mental-hyoid distance and anterior displacement of mandible
O	Opening	Ease, symmetry and range	Assess and measure mouth opening in cm
U	Uvula	Visibility	Assess pharyngeal structures and classify ¹
T	Teeth	Dentition (Figure)	Assess for presence of loose teeth and dental appliances
H	Head	Flexion, extension, rotation of head and cervical spine	Assess all ranges of movement
S	Silhouette	Upper body abnormalities, both anterior and posterior	Identify potential impact on control of airway ² of large breasts, buffalo hump, kyphosis, etc.

	(Right)	(Left)
		(Maxilla)
	7, 6, 5, 4, 3, 2, 1	1, 2, 3, 4, 5, 6, 7
	7, 6, 5, 4, 3, 2, 1	1, 2, 3, 4, 5, 6, 7
		(Mandible)

FIGURE Schematic representation of anterior view of dentition, with teeth numbered sequentially from midline. Indicate abnormalities as: A = Absent; B = Bridge; C = Caps; L = Loose.

anaesthetic record. These would act as an "aide-memoire," help to ensure more complete documentation, and then be available for review of charts for audit. We would welcome comments.

J.M. Davies MSc MD FRCPC

C.J. Eagle MD FRCPC

Department of Anaesthesia

Foothills Hospital at the University of Calgary

Calgary, Alberta, T2N 2T9

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- 2 Davies JM, Weeks S, Crone LA, Pavlin E. Difficult intubation in the parturient. *Can J Anaesth* 1989; 36: 668-74.

Erratum

Re "Calcium-channel blockers and anaesthesia" in the January issue of *Canadian Journal of Anaesthesia*.

In Table I, the specificity for slow calcium channels of Group B is "++" (and not +++).

Durand P-G, Lehot J-J, Foëx P. Calcium-channel blockers and anaesthesia. *Can J Anaesth* 1991; 38: 75-89.