SOLUTION OF A PROBLEM OF ENDOTRACHEAL ANAESTHESIA IN SMALL CHILDREN

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WHEN ADMINISTERING endotracheal anaesthetic to infants and small children, it is necessary to use a soft tube of small diameter. Such a tube unfortunately kinks very easily, usually in its middle portion. This can be most embarrassing when the anaesthetist does not have access to the patient's mouth at the time. The following method obviates this difficulty. A tube is found which will just slide outside the tube used for actual intubation. I shall call these tubes the outer and inner tubes respectively. A tube two sizes larger is about right. This outer tube is cut one inch shorter than the inner tube. It is then slid on to the inner tube and taped in place. The resultant composite tube is still the right size to enter the trachea but too stiff to kink in its vulnerable middle portion. It is a little harder to see that the tube is properly in the trachea with this method.