

جامعة ساوة الاهلية  
كلية التقنيات الصحية والطبية  
قسم التخدير - اللجنة العلمية



# NASOPHARYNGEAL AIRWAY

جامعة ساوة

كلية التقنيات الصحية والطبية

قسم تقنيات التخدير

المرحلة (الثالثة)

رقم المحاضرة: الثانية العملي

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## Nasopharyngeal airway

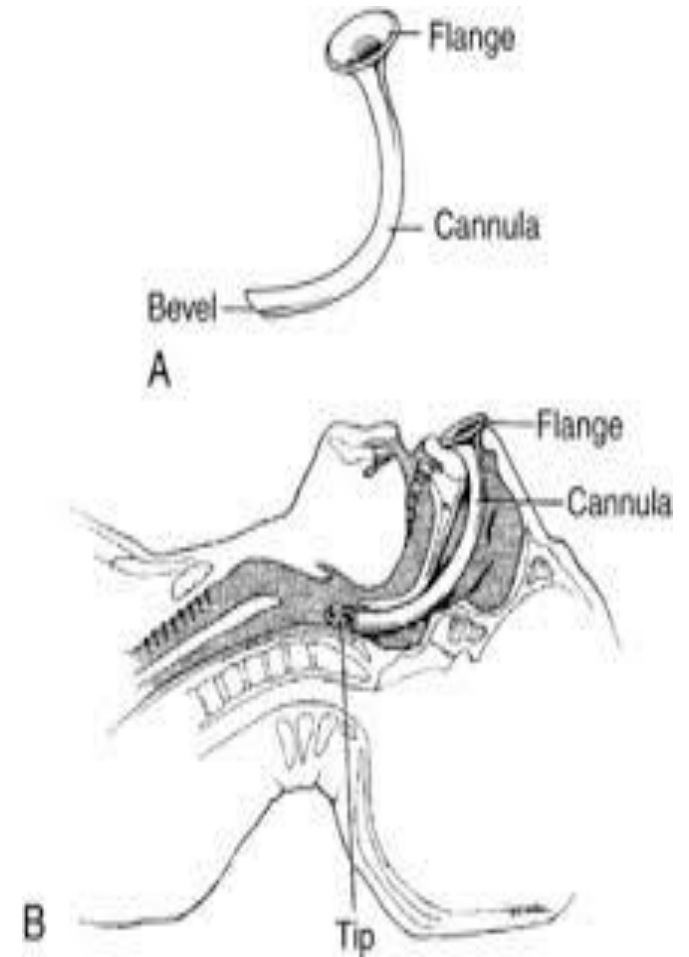
This airway is inserted through the nose into the nasopharynx, bypassing the mouth and the oropharynx. The distal end is just above the epiglottis and below the base of the tongue.



## Components:

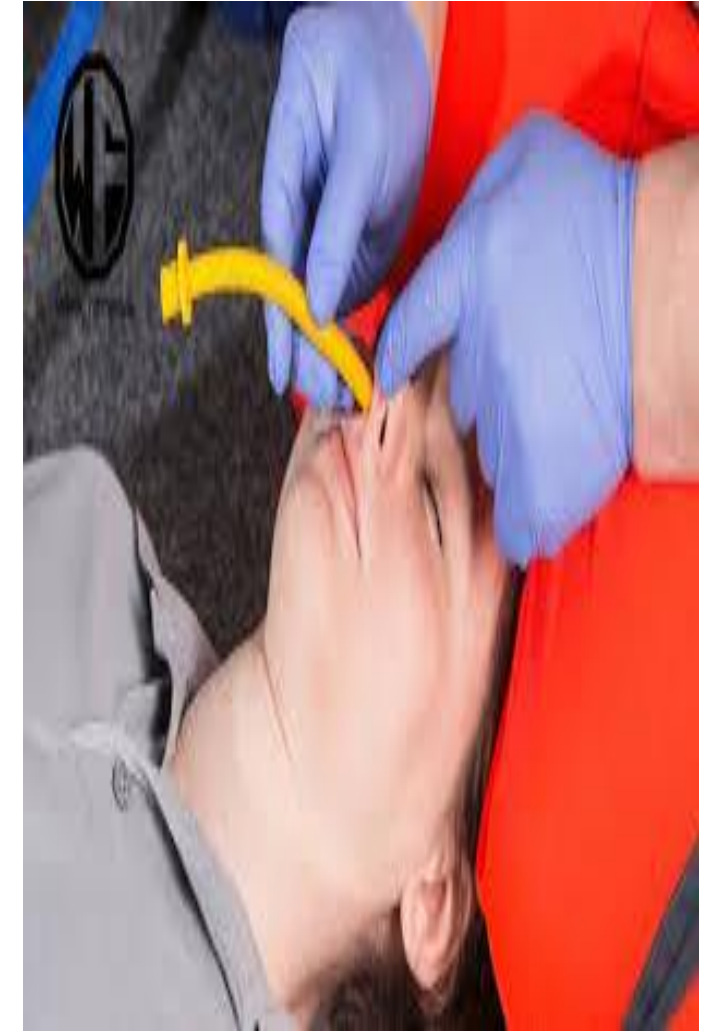
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1. The rounded curved body of the nasopharyngeal airway.
2. The bevel is left-facing.
3. The proximal end has a flange. A 'safety pin' is provided to prevent the airway from migrating into the nose.



## Problems in practice and safety features:

1. Its use is not recommended when the patient has a bleeding disorder, is on anticoagulants, has nasal deformities or sepsis.
2. Excess force should not be used during insertion as a false passage may be created.
3. An airway that is too large can result in pressure necrosis of the nasal mucosa, while an airway that is too small may be ineffective at relieving airway obstruction.



## Step-by-Step Description of Nasopharyngeal Airway Procedure

- 1- As necessary, clear the oropharynx of obstructing secretions, vomitus, or foreign material.
- 2- Determine the appropriate size of the airway.
- 3- When held against the side of the face, a correctly sized airway will extend from the tip of the nose to the tragus of the ear. Measure the length of the airway to ensure it does not cause obstruction.

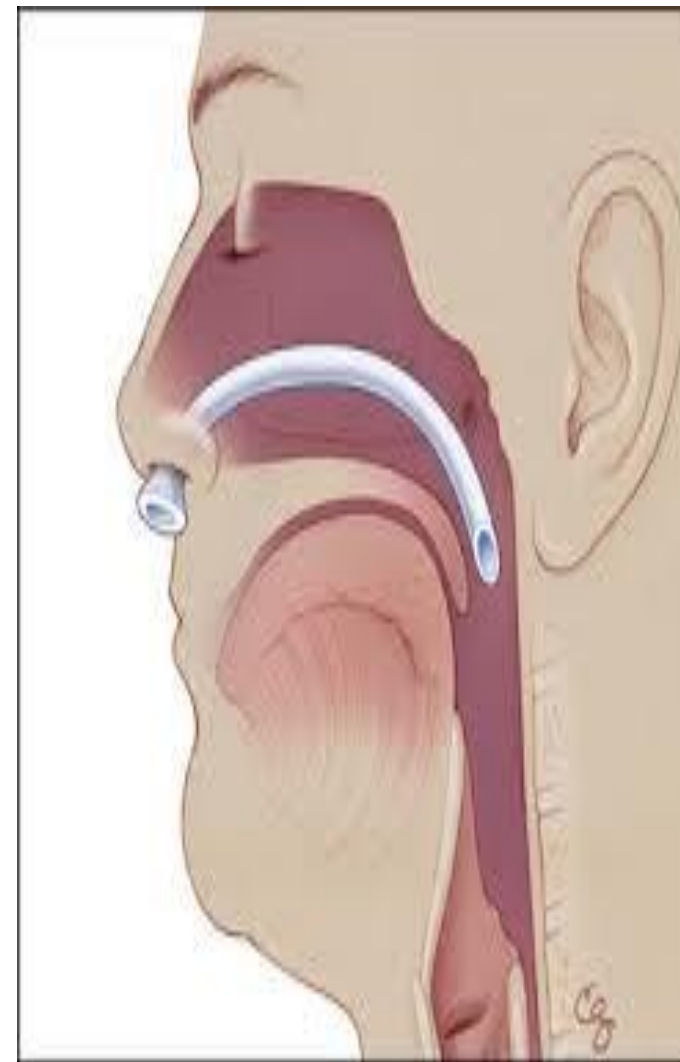


- PRESENTATION TITLE
- 4- Open the nares to reveal the nasal passage.
  - 5- Inspect both nares to determine which side is wider.
  - 6- Lubricate the nasopharyngeal airway with water-soluble lubricant or anesthetic jelly such as lidocaine gel.
  - 7- Insert the airway posteriorly (not cephalad) parallel to the floor of the nasal cavity, with the bevel of the tip facing toward the nasal septum (ie, with the pointed end lateral and the open end of the airway facing the septum). Use gentle yet firm pressure to pass the airway through the nasal cavity under the inferior turbinate.



8- If you encounter resistance, try rotating the airway slightly and re-advance. If the tube still will not pass, try inserting it into the other nostril.

9- Advance the airway straight back until the flange is resting at the nostril opening.





**THANK YOU**

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