Research Symposium

IMPROVING COMFORT LEVELS IN PERFORMING AWAKE FIBEROPTIC INTUBATION: A COLLABORATIVE EFFORT BETWEEN OTOLARYNGOLOGY AND ANESTHESIA

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INTRODUCTION

Awake fiberoptic intubation (AFI) is considered the "gold standard" for a difficult airway where relaxation may lead to a "cannot ventilate, cannot intubate" situation. Otolaryngology/Anesthesia departments often work in conjunction when performing AFI. Many institutions have slight variations in protocols, which can create confusion when performing AFI. Having a standardized protocol has the potential to reduce errors.

AIMS/OBJECTIVES

The aim of this study was to implement a standardized AFI protocol, and to measure Resident/attending comfort level in performing AFI pre and post implementation of the protocol.

METHODS

This study was conducted from September 2022 to September 2024. An initial Zoom presentation was conducted amongst Otolaryngology/Anesthesia departments at a single institution, which involved creating a collaborative standardized protocol combining procedural from both departments. A survey inquiring about comfort levels in performing AFI amongst Otolaryngology/Anesthesia Residents/attendings was distributed pre implementation of the protocol, 6 months post implementation and 10 months post implementation. Outcome measures included demographic data, comfort level in performing AFI and a comments section for why the protocol is or is not helpful.

RESULTS

There was a total of 54 respondents amongst Otolaryngology/Anesthesia Residents/attendings. Respondents were asked if they felt less, equally, or more comfortable 6 months after implementation of the protocol and results were 6%, 59% and 35%; respectively. Respondents were then asked this again 10 months post implementation and results were 0%, 53% and 47%; respectively. A comments section was also included in the survey and notable comments included: "would appreciate a hands-on learning session," "having a protocol reduces errors," and "the protocol adds consistency amongst providers."

CONCLUSIONS

Creating a standardized AFI protocol increased overall comfort levels in performing AFI amongst Otolaryngology/Anesthesia Residents/attendings at this single institution. A standardized protocol is simple to implement and has the potential to increase comfort levels and reduce errors when performing AFI

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