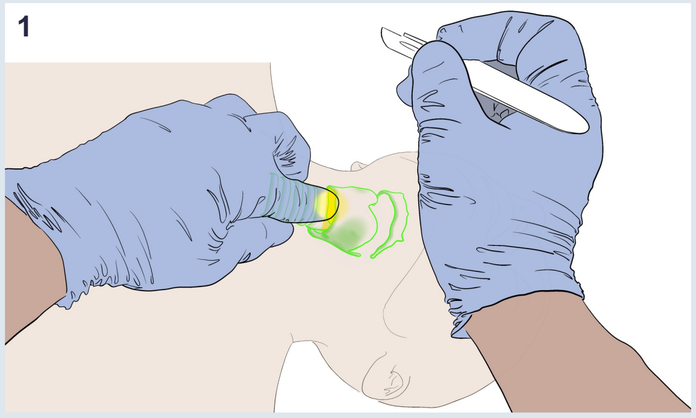
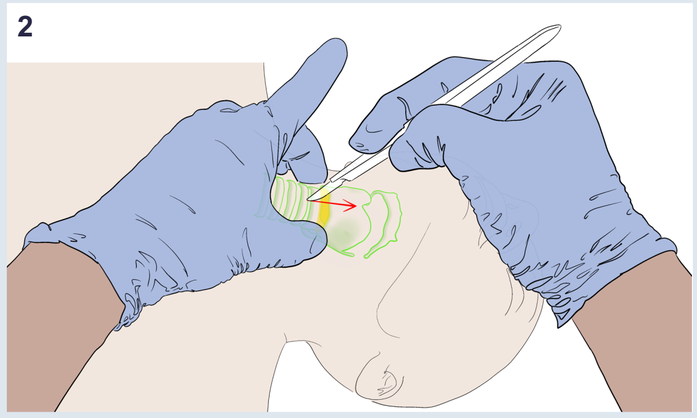
1



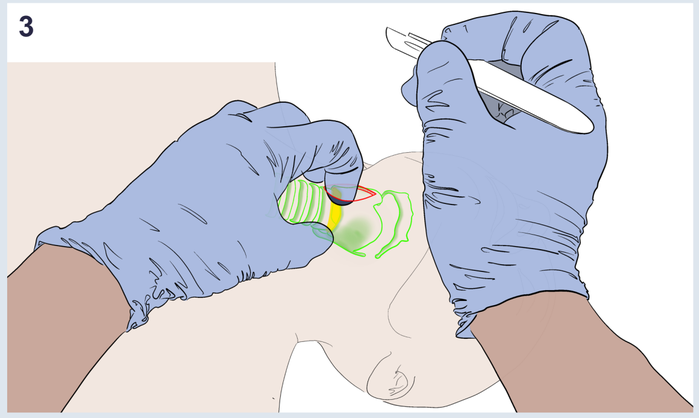
Identify laryngeal anatomy in maximum neck extension and locate the midline with non-dominant hand

2



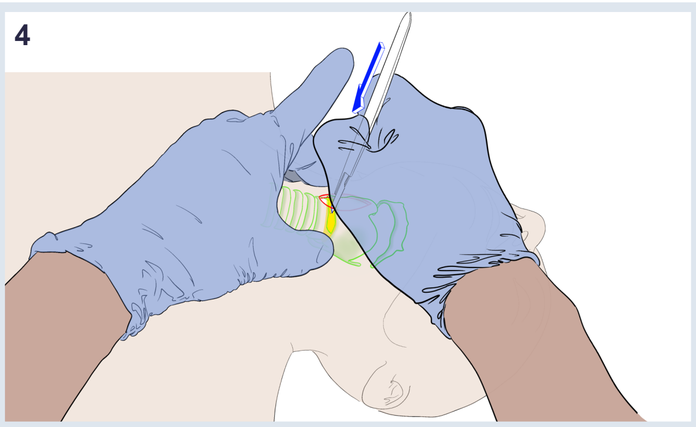
Tension the skin and stabilise larynx with non-dominant hand. Make a midline vertical incision bottom to top with the scalpel in dominant hand.

3



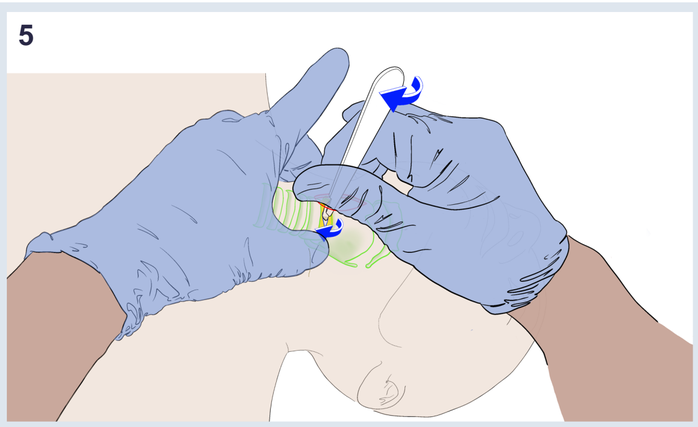
Use blunt dissection, identify and stabilise the larynx. Identify the cricothyroid membrane with the index finger of non-dominant hand.

4



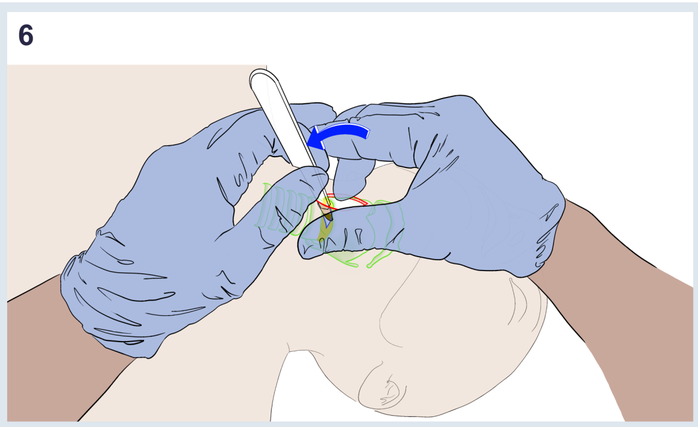
Make a transverse stab incision through the cricothyroid membrane with the cutting edge of the blade facing towards you.

5



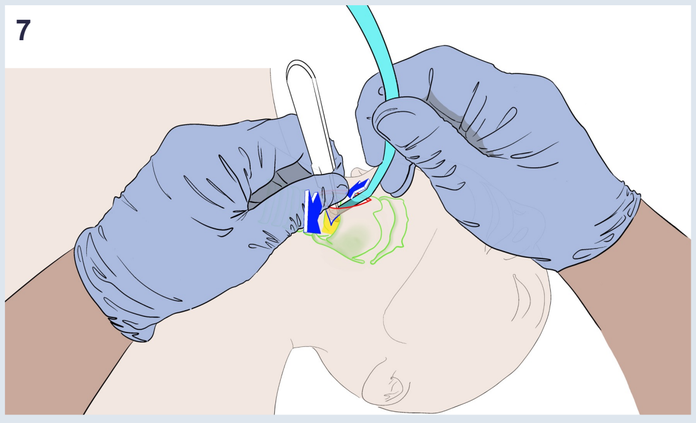
Keep the scalpel perpendicular to the skin and turn it through 90º so the sharp edge points caudally (towards the feet).

6



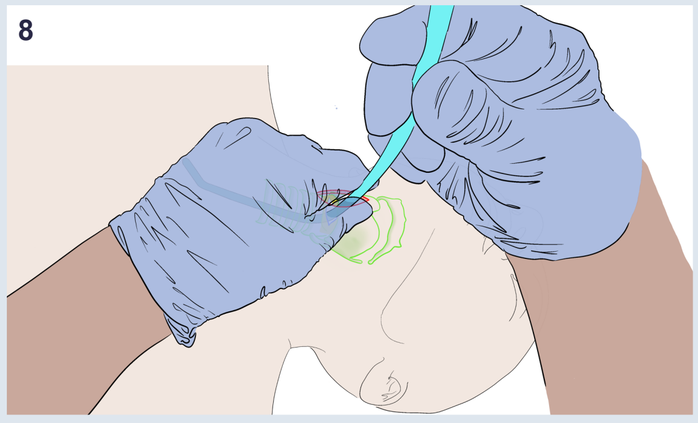
Swap hands; hold the scalpel with the non-dominant hand.

7



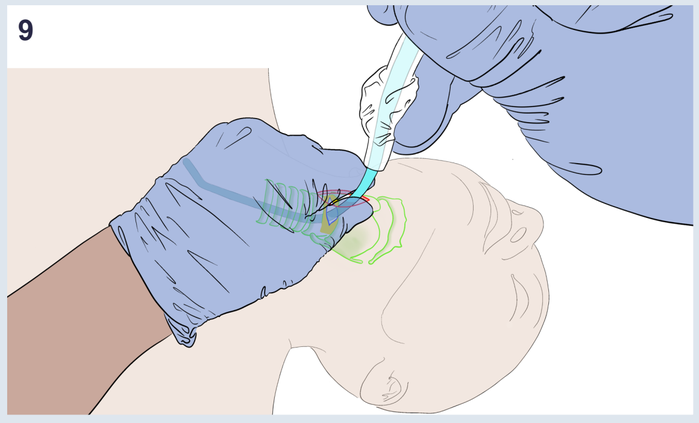
Maintain gentle traction, pulling the scalpel towards you, and keeping the handle vertical to the skin. Slide the bougie alongside the medial aspect of the blade on into the trachea 10–15 cm.

8



Remove the scalpel, stabilise the trachea, tension the skin and hold the bougie with non-dominant hand.

9



Railroad a size 6.0 mm cuffed tracheal tube over the bougie. Rotate the tube as it is advanced.