

Zor Entübasyon Olduğu Düşünülen Dev Guatrlı Olguda Anestezi Yönetimi

73. BÖLÜM

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ÖZET

Total tiroidektomi planlanan 58 yaşındaki kadın hasta preoperatif değerlendirmesinde boyun anterior kısmında bulunan dev guatr kitlesi nedeniyle ve Mallampati skoru sınıf IV olarak görülmesi üzerine beklenen zor entübasyon kabul edildi. Preoperatif tetkikleri, Kulak Burun Boğaz (KBB) Hastalıkları ve Kardiyoloji konsültasyonları tamamlandı. Ameliyat odasında zor entübasyon gereçleri hazırlanarak videolaringoskopi ile uyanık entübasyon planlandı. Hastaya preoperatif midazolam ile sedasyon yapıldı. Ameliyat odasına alındıktan sonra deksmedetomidin infüzyonu başlandı. Preoksijenizasyon uygulandı. Topikal anestezi uygulamasının ardından, videolaringoskop ile başarılı bir şekilde hasta entübe edildi. İnhalasyon anestezisi ve roküronyum bromür uygulanarak kontrollü ventilasyon ile anestezi idamesi sağlandı. Yaklaşık 2.5 saat süren operasyonun ardından yeterli spontan solunum, tam uyanıklık sağlandıktan sonra tüp değişim kateteri (Gum elastik buji) kullanılarak hasta ekstübe edildi. Postoperatif 2 saat takip edilen hasta stabil seyretmesi üzerine servise transfer edildi.

OLGU

Preoperatif Dönem

Boyunda şişlik şikayeti ile Genel Cerrahi polikliniğine başvuran 58 yaşındaki kadın hastaya guatr tanısı konularak bilateral total tiroidektomi operasyonu planlandı. Hikayesinde herhangi bir özellik bulunmayan hastanın yapılan muayenesinde boynun ön bölgesinde, tiroit lojuna uyan bölgede yaklaşık 8x8 cm tiroide ait kitle mevcuttu, kitle nedeniyle tiromental ve sternomental mesafe

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