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TRIPLE AIRWAY MANOEUVRE

Triple Airway Manoeuvre



1 Preparing for the procedure

- Sanitise hands and don personal protective equipment, nitrile gloves and face shield.
- Place adequate neck flexion depending on patient's age and size. For an adult: place a 2-3 cm pad below the occiput where possible as this straightens out the curve in the airway when supine. A child is maintained supine and for an infant, place small 2 cm pad beneath their shoulders.



2 Performing the procedure

- Position oneself at the top of the patients head.
- Place the thenar eminence of each hand over the patient's zygomatic arch.
- Place the tips of the index fingers under the patient's angle of the mandible.
- While tilting the patient's head back (depending on age) displace the jaw at right angles to the line of the pharynx by pressure at the angles of the mandible.
- Check for breathing by looking for movement of chest/abdomen, listening and feeling for air movement. An assistant may also feel for movement with one hand on chest/abdomen at costal margins.



Background

The triple airway manoeuvre is the combination of head extension, mouth opening and jaw thrust, and is considered to be the most effective method for opening the airway. This method provides a more patent airway than extension of the head without jaw thrust, and is the recommended position for insertion of the LMA.

Equipment required

- Nitrile gloves
- Face shield
- Hand sanitiser



References

Aoyama K, Takenaka I, Sata T, Shigematsu A. The triple airway manoeuvre for insertion of the laryngeal mask airway in paralyzed patients. *Can J Anaesth.* 1995;42(11):1010-6.

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