

NATIONAL CANCER CENTER OF MONGOLIA

Title: RETROGRADE TRACHEAL INTUBATION IN NATIONAL CANCER CENTER

Author (s) Name: B.Bolormaa, S.Denis, B.Gan-Erdene, B.Battsengel
NCC, Mongolia

Anesthesia process: The patient's back and place the O_2 mask using the 20 G intravenous IV Fentanyl 100 µg. We reported successful anesthesia retrograde tracheal intubations in NCC**.**

Case I. 03 June 2015. A 30 year-old male patient was posted for elective surgery head and neck department. The surgery required to recurrent tumor (d= 6cm) of Rt. Sub mandible gland $T_2N_1M_0$ do MND tumor remove. On examination of the airway, all parameters such as mouth not opening (he had big accidence and neck surgery in 2002, 2007, 2012). Chin-thyroid distance: less than 2 cm. Dentures, removable teeth. (Picture1**.**)



Case II. 19 Sep 2015. A 66 year-old male patient posted for emergency case head and neck surgery department. The patient had two surgeries NCC. First elective surgery was 17 Sep 2015 (required to big tumor resection and reconstruction by ALTFF in cancer mandibles) with normal intubation. Second emergency surgery was 19 Sep 2015(free plat to restore the blood supply and airway oxygen supply to increase) with retrograde intubation. He was breathing periodically interrupted. (Picture 2**.**)

Case III. 06 Feb 2016. A 57 year-old male patient posted for elective case head and neck surgery department. The surgery required to recurrent tumor (d= 5cm) of tongue (near epiglotic and trachea almost closed). On examination mouth normal opening but he was breathing difficult . We cannot put retrograde intubation, our surgeons put tracheostomy (Picture3**.**)

Biography

Bolormaa.B has completed his MBA from Mahidol University in Thailand and doctorate NMU Mongolia. She is worked anesthesia department of NCC of Mongolia since 2000. She has published more than 15 papers in reputed journals. She studied in Thailand, South korea, Swizerland, Egypt.

Presenting author details

Full name: BOLORMAA Batnasan
Contact number: 976-95900789
Email id: Batnasan_bolormaa@yahoo.com
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