

Dear Doctor:

This patient suffers with a recurrent stenosis of her airway which may lead to shortness of breath or stridor. She is more likely to have mucous plugging especially in the presence of a respiratory infection. Please avoid a tracheostomy unless lifesaving and do consult with her airway specialist detailed below:

Given the small airway diameter, intubating the patient may be very difficult, if not impossible.

See other side ↓

Attempts at intubating the patient without directly visualizing the subglottis can cause further traumatic swelling and worsen the situation.

Consider preventative management until the subglottis can be visualized or the patient can be taken to the operating room to improve the airway.

- **Steroid injection** either IV or IM (Dexamethasone 10 mg IV, Solu-Medrol IV/IM, or equivalent)
- **Ventilation support** using CPAP, BIPAP, or High Flow O₂ via nasal cannula
- **Respiratory support** with adjuncts such as Heliox and racemic epinephrine inhalation