

3, was requested. The device was passed easily, and a patent airway was obtained. The patient underwent an uneventful 3-h inhalation anesthetic with spontaneous ventilation. The chin was released from the chest, and the defect, which included all the anterior and lateral neck, was covered with thick partial thickness skin grafts. The LMA was left in place until the patient regained full consciousness, and the recovery was uneventful.

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Use of the Lighted Stylet to Aid Direct Laryngoscopy

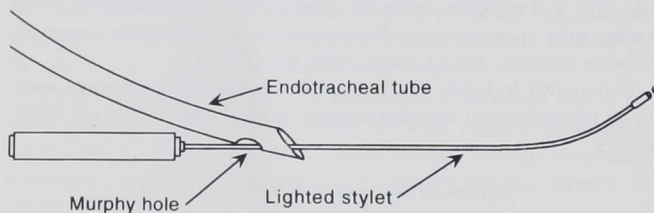


Fig. 1. Distal end of endotracheal tube with the lighted stylet passing through the Murphy hole. In this configuration, the handle of the lighted stylet and endotracheal tube can be easily grasped in one hand for insertion into the trachea.

To the Editor:—Recently, several authors have advocated the use of a lighted stylet to facilitate either awake intubation or an unanticipated difficult intubation.¹⁻³ During direct laryngoscopy, the lighted stylet can improve the view in the hypopharynx, and transillumination can assist in guiding the endotracheal tube into the trachea.

We have had success in patients with unanticipated difficult intubation with a modification of this technique. Based on a previous report using the LTA kit (Abbott Laboratories, North Chicago, IL),⁴ we thread a lighted stylet (Tube Stat, Concept, Clearwater, FL) through the Murphy hole of an endotracheal tube (Fig. 1). Using this configuration, the endotracheal tube does not obstruct the view while the end of the lighted stylet is placed in the trachea. Also, traumatic complications may be less likely to occur.^{5,6} The lighted stylet threaded through the Murphy hole is more maneuverable, and the light is not attenuated by the surrounding endotracheal tube. Once the tip of the lighted stylet is placed in the trachea, the endotracheal tube can be threaded down over the tip of the stylet into the trachea. With the stylet passing through the Murphy hole, if difficulty is en-

countered because of the alignment of the curved (hockey stick) stylet and the trachea, the endotracheal tube can be gently rotated 180° to improve alignment and ease the passage of the endotracheal tube into the trachea.

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