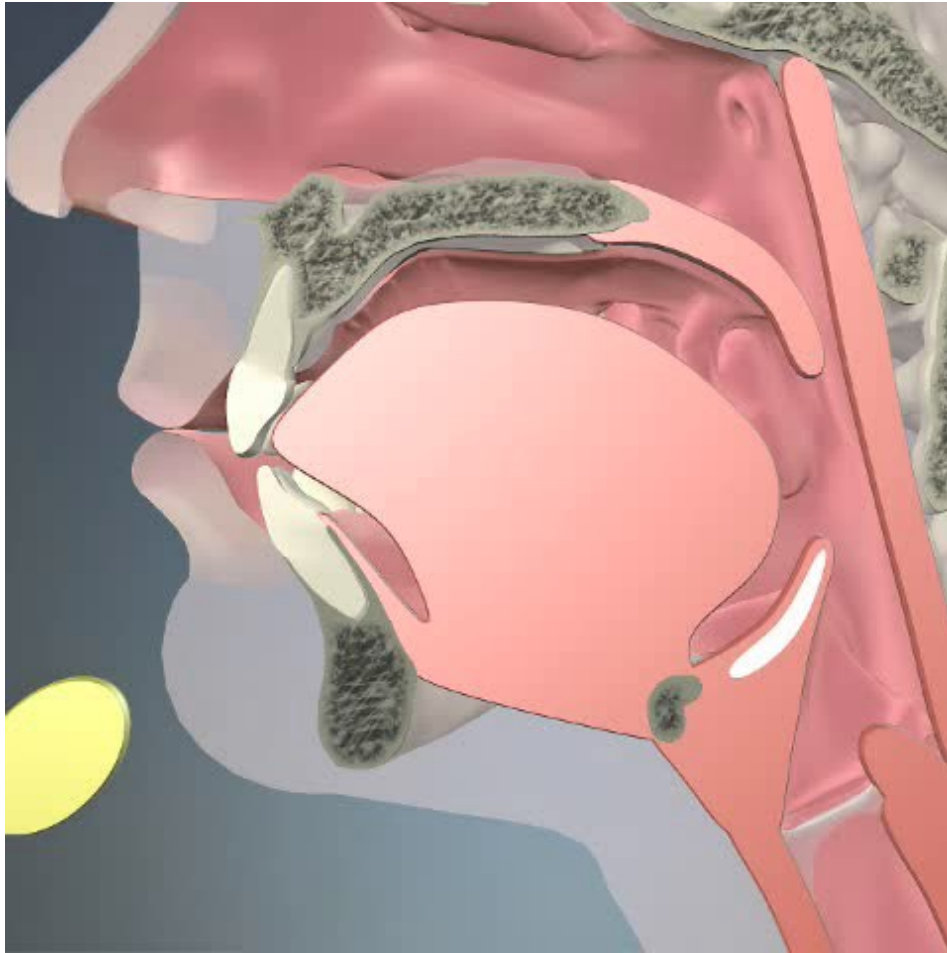


Manobras críticas

Disciplina de Técnica Cirúrgica

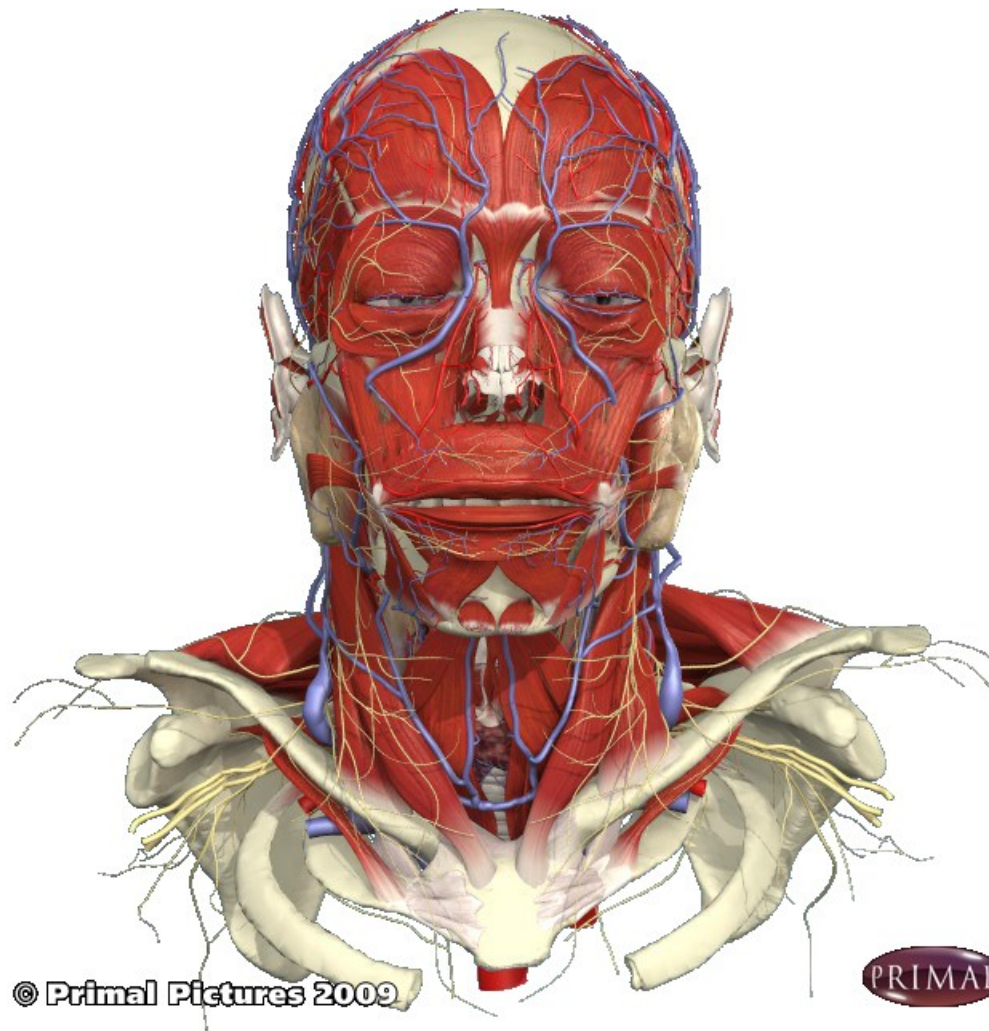
FMUSP

“ENGASGO”



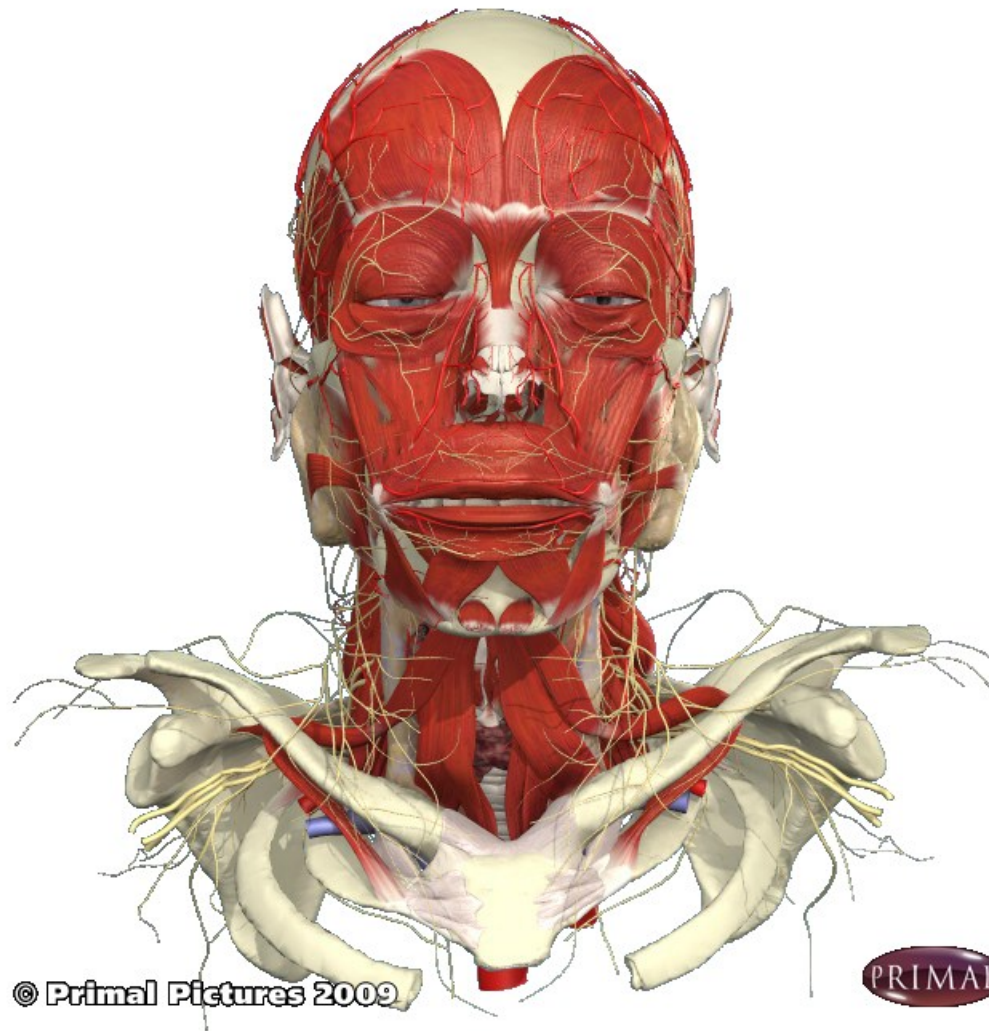
Manobra de Heimlich





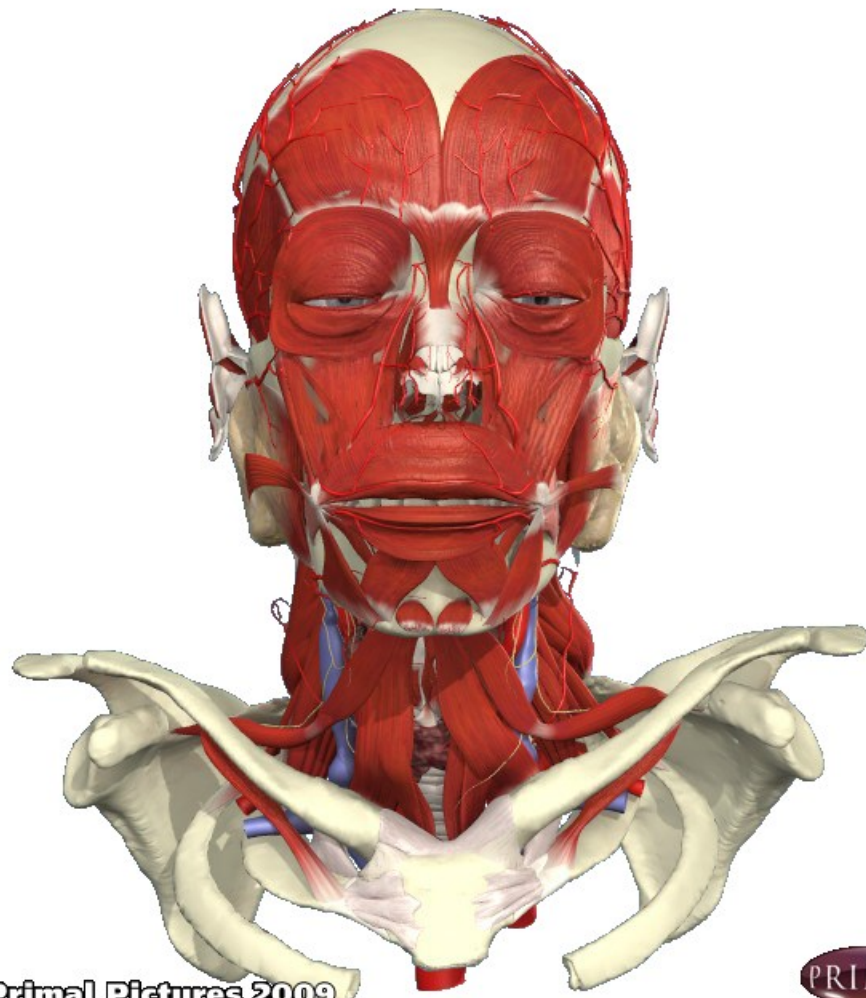
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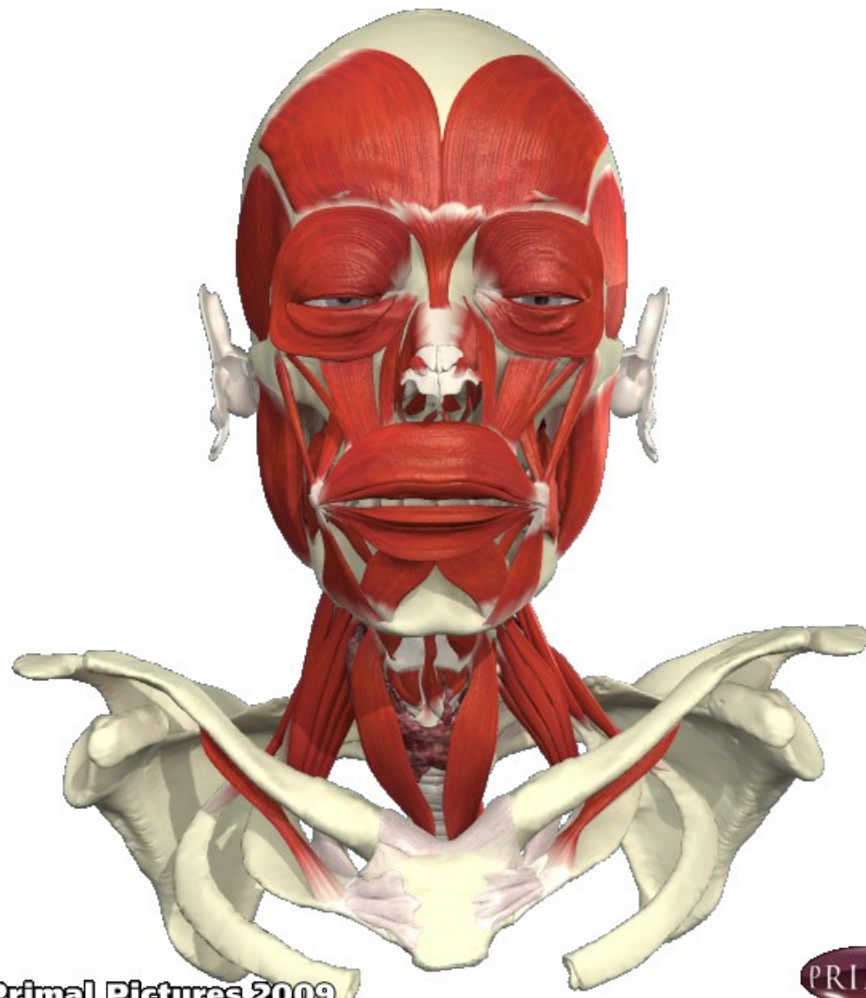
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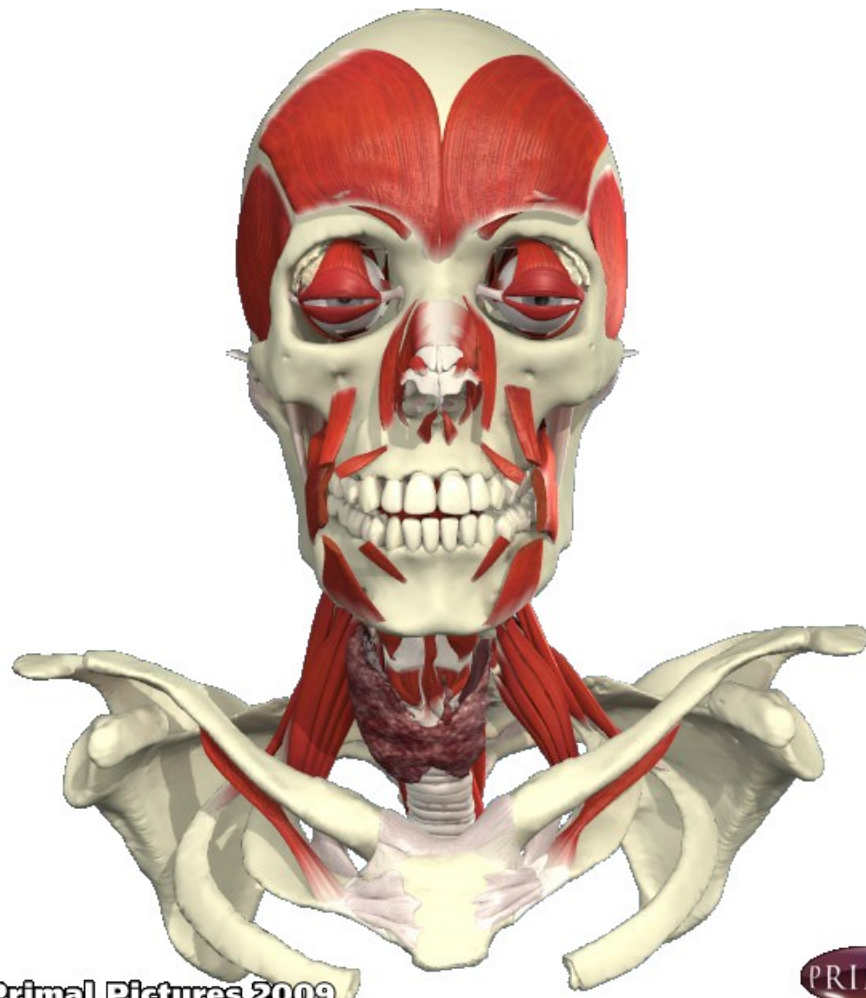
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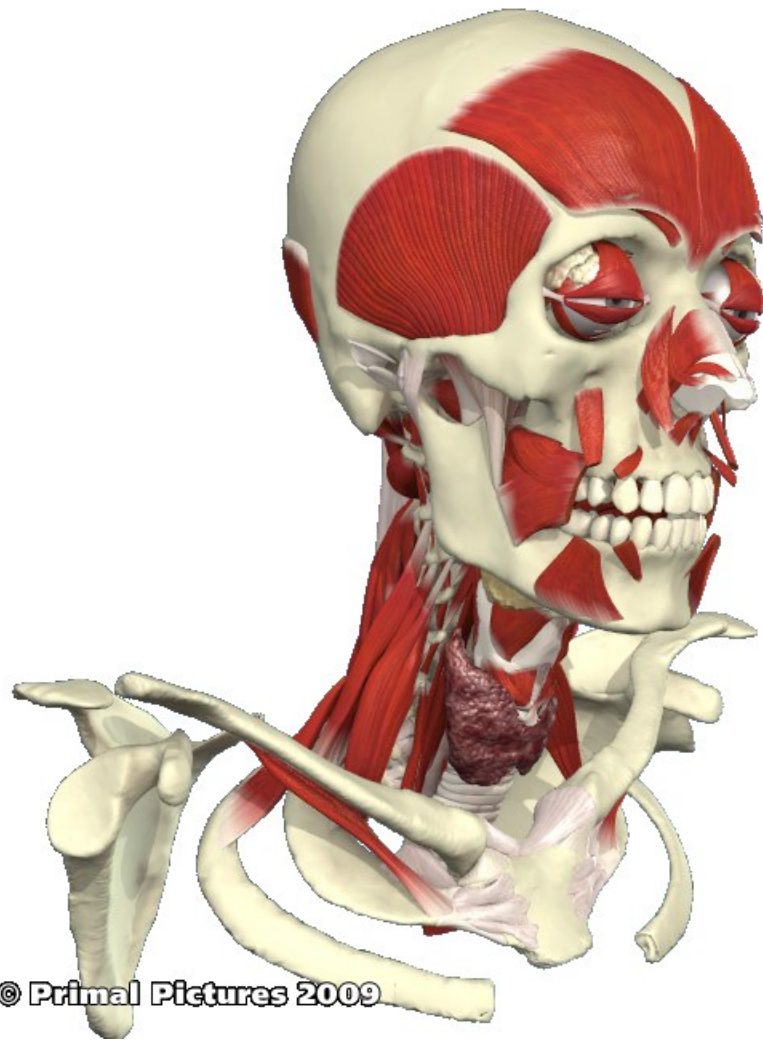
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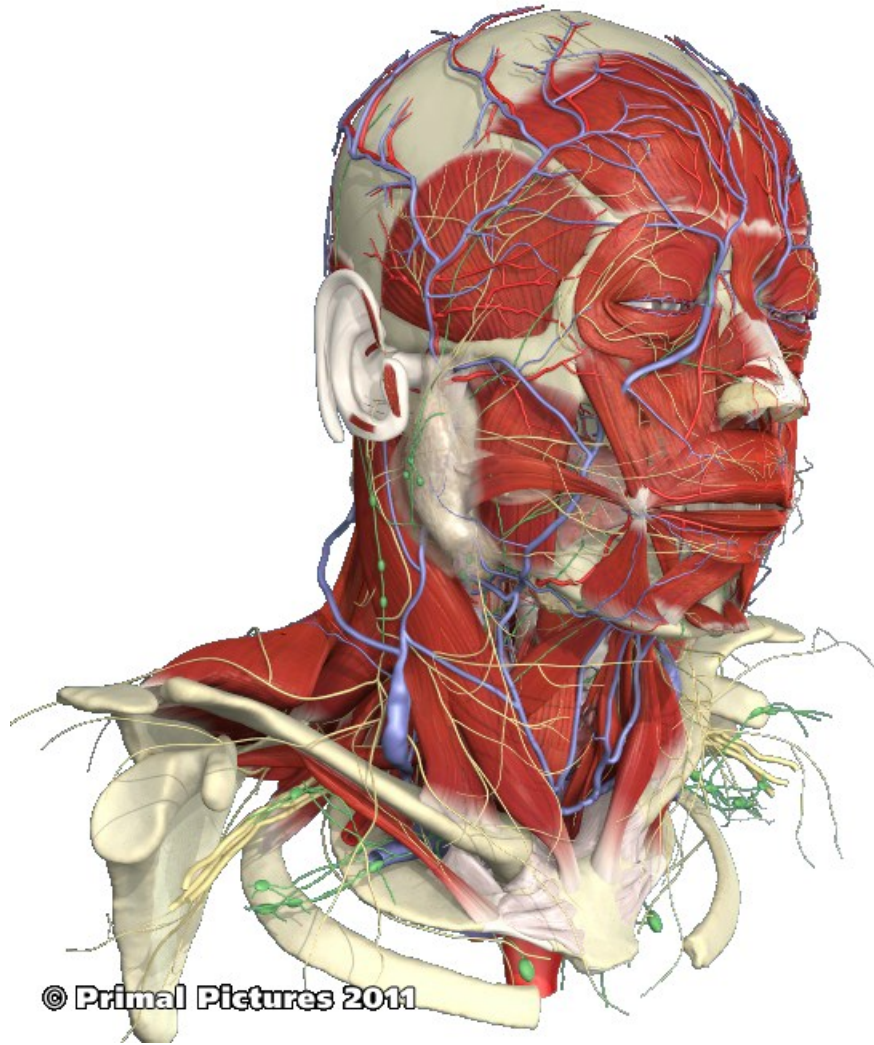
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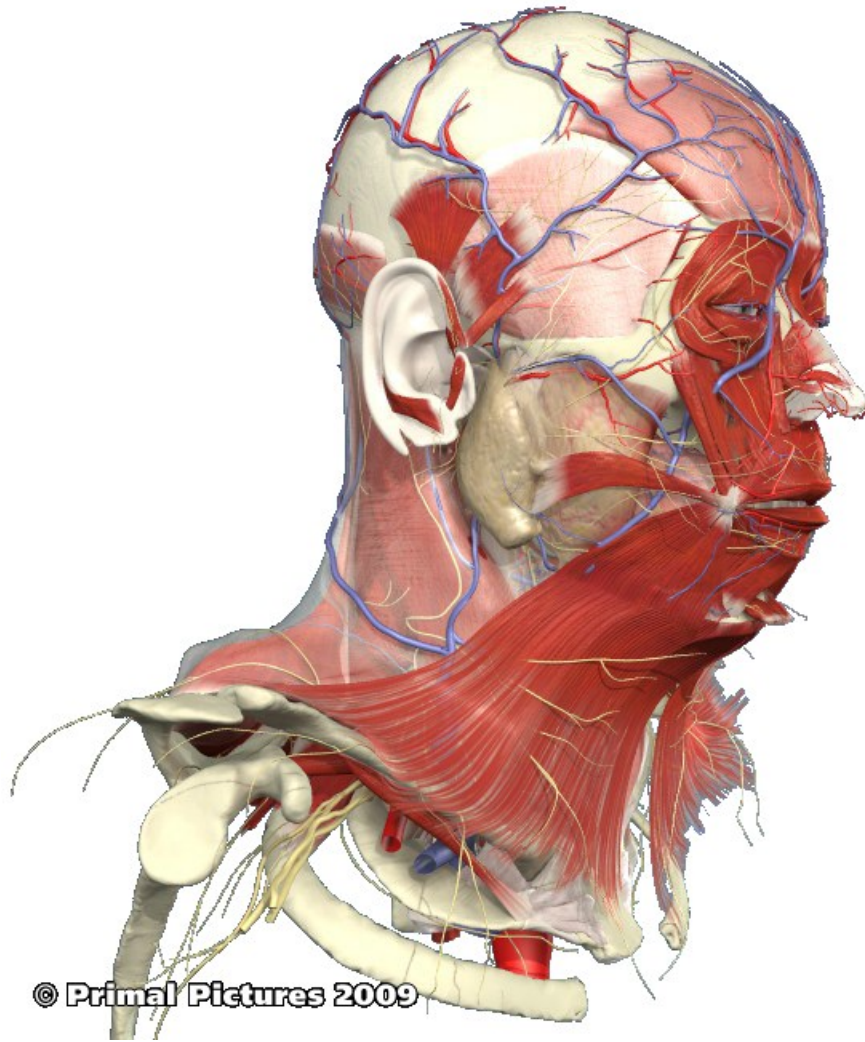
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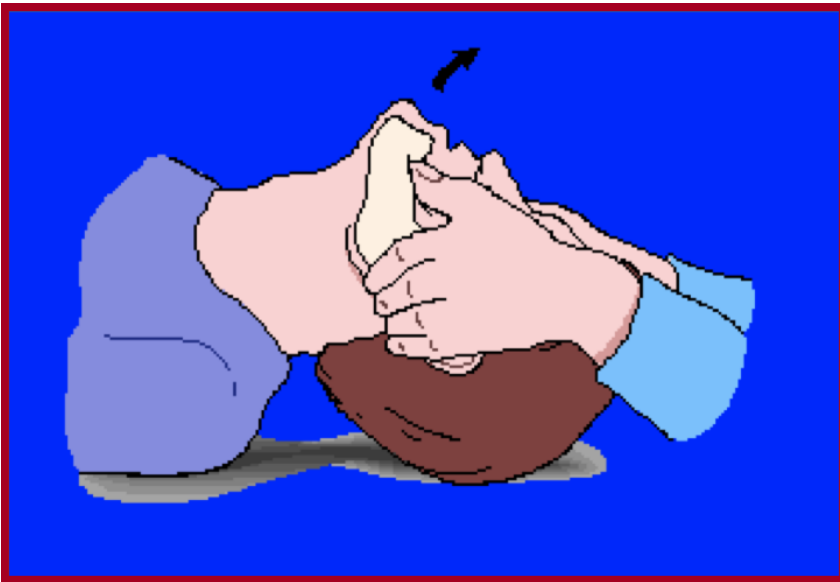


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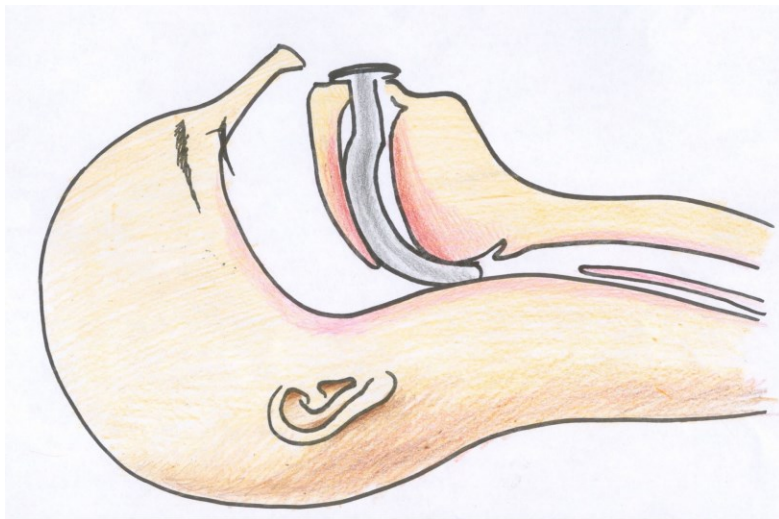
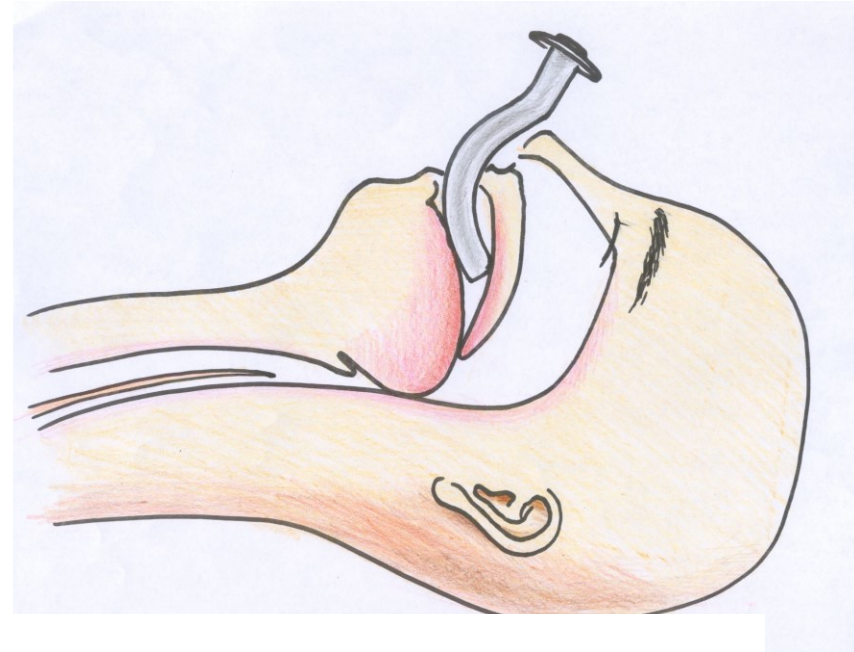
Obstrução de vias aéreas

- Tração da mandíbula
- Aspiração da orofaringe

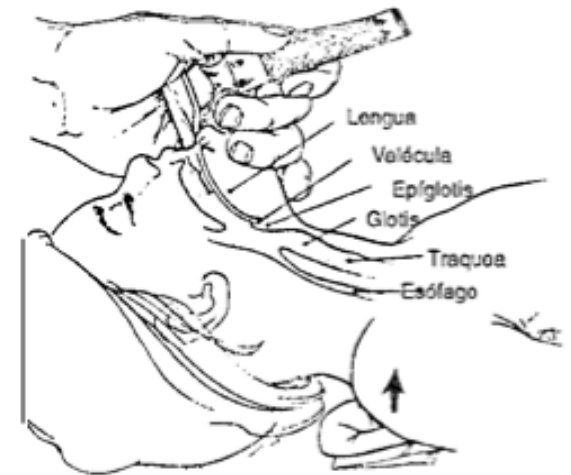
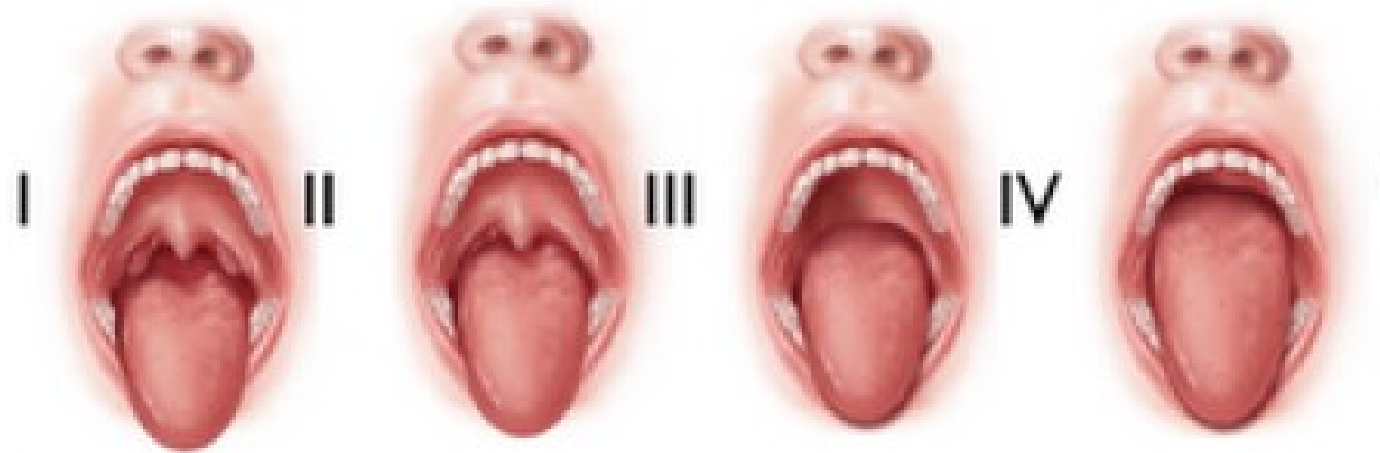


Guedel

- Pacientes inconscientes
 - Técnica de passagem
 - Posicionamento e
 - Tamanho



Classificação de Mallampati

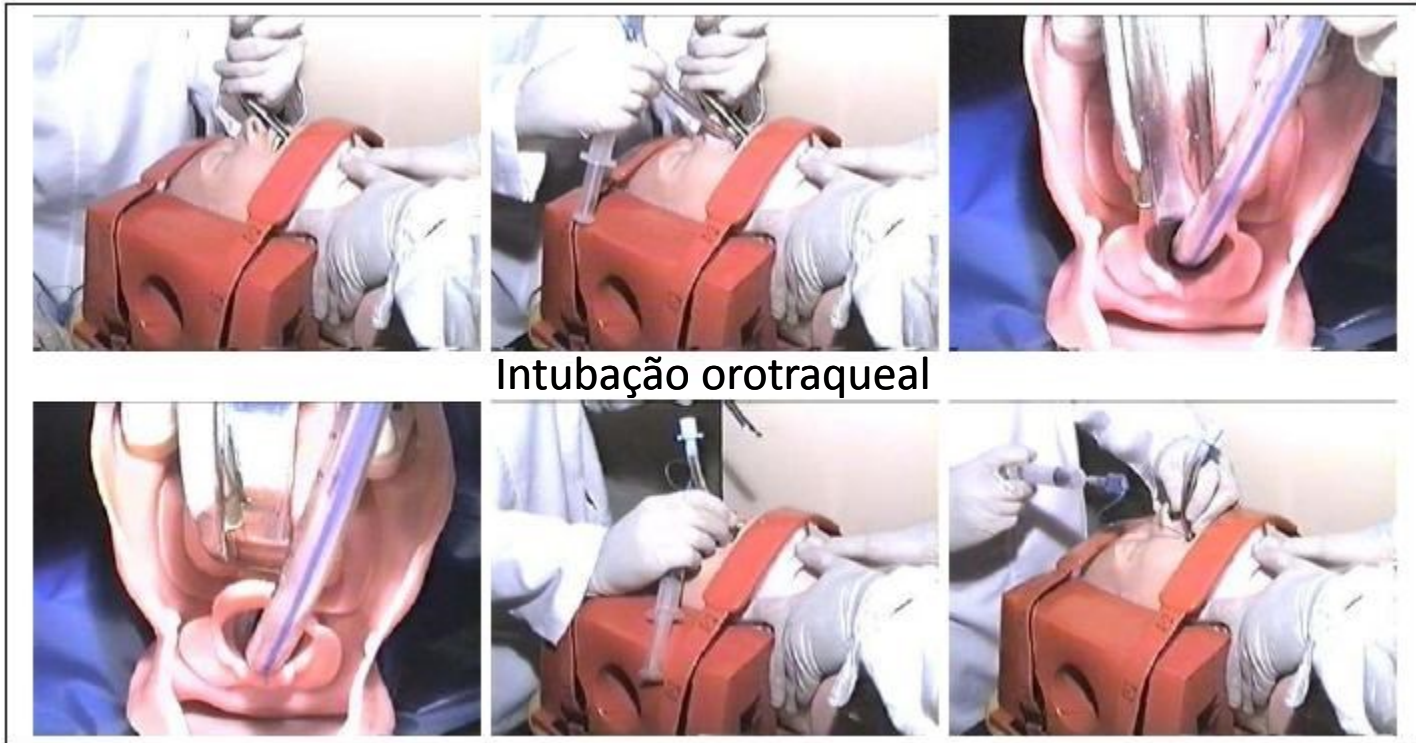


Proteção da coluna cervical





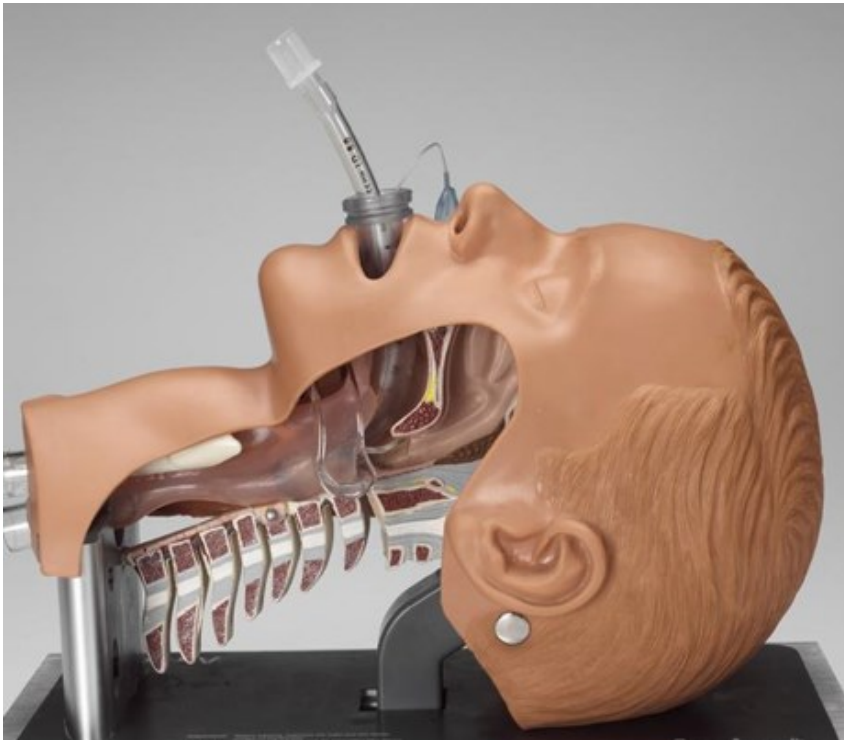
Estabilização da
coluna cervical



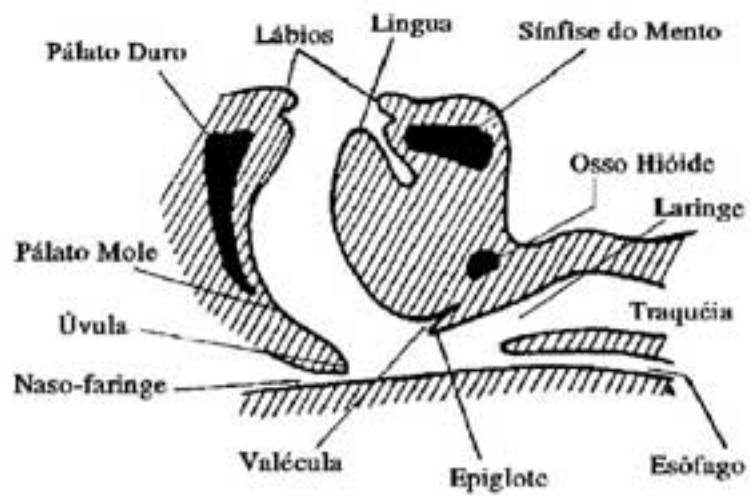
Intubação orotraqueal

Intubação orotraqueal

Posicionamento



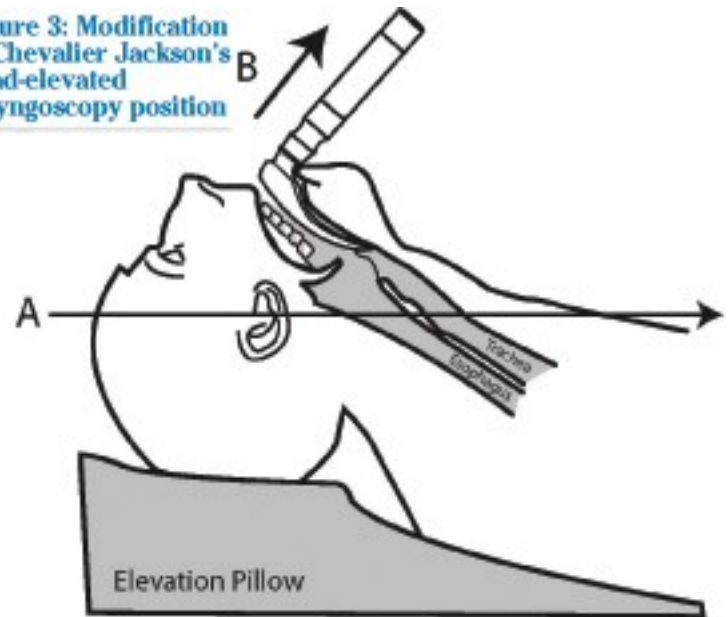
Decúbito dorsal



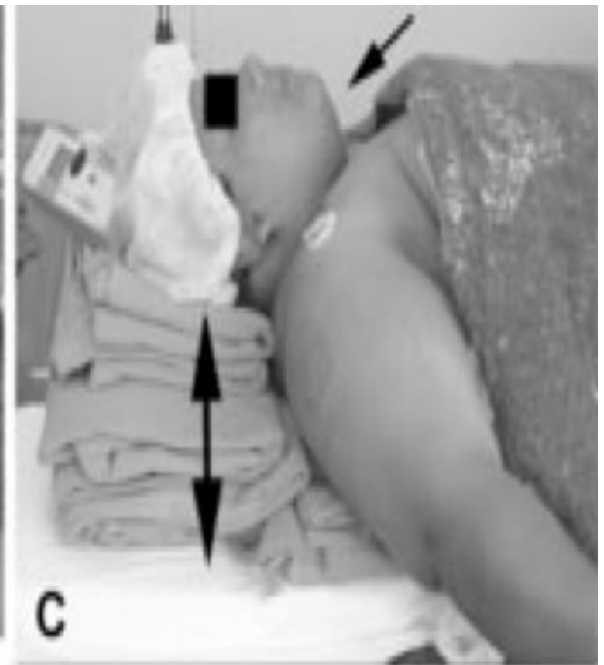
Alinhamento dos eixos



Figure 3: Modification of Chevalier Jackson's head-elevated laryngoscopy position



Alinhamento dos eixos





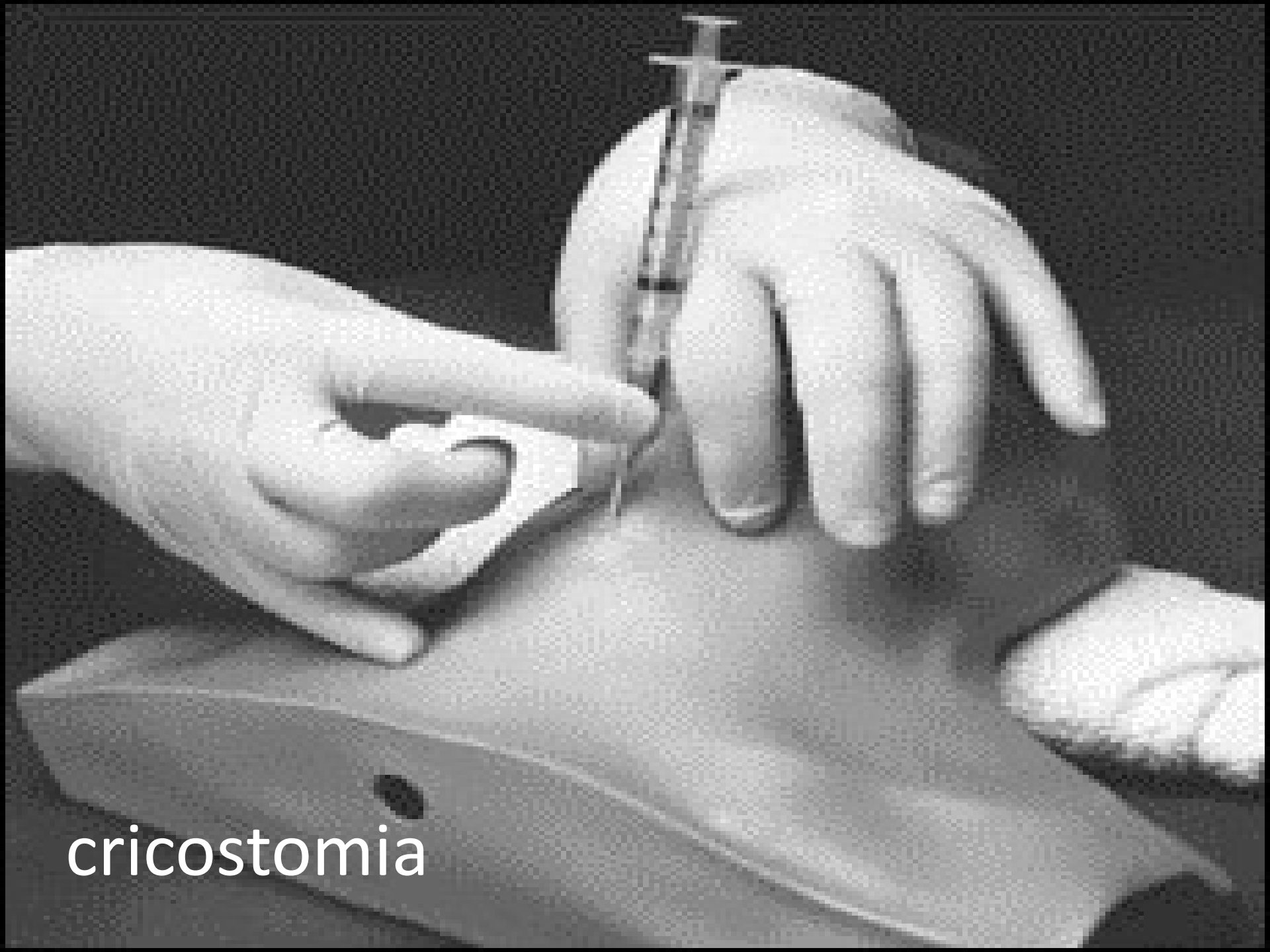
cricostomia



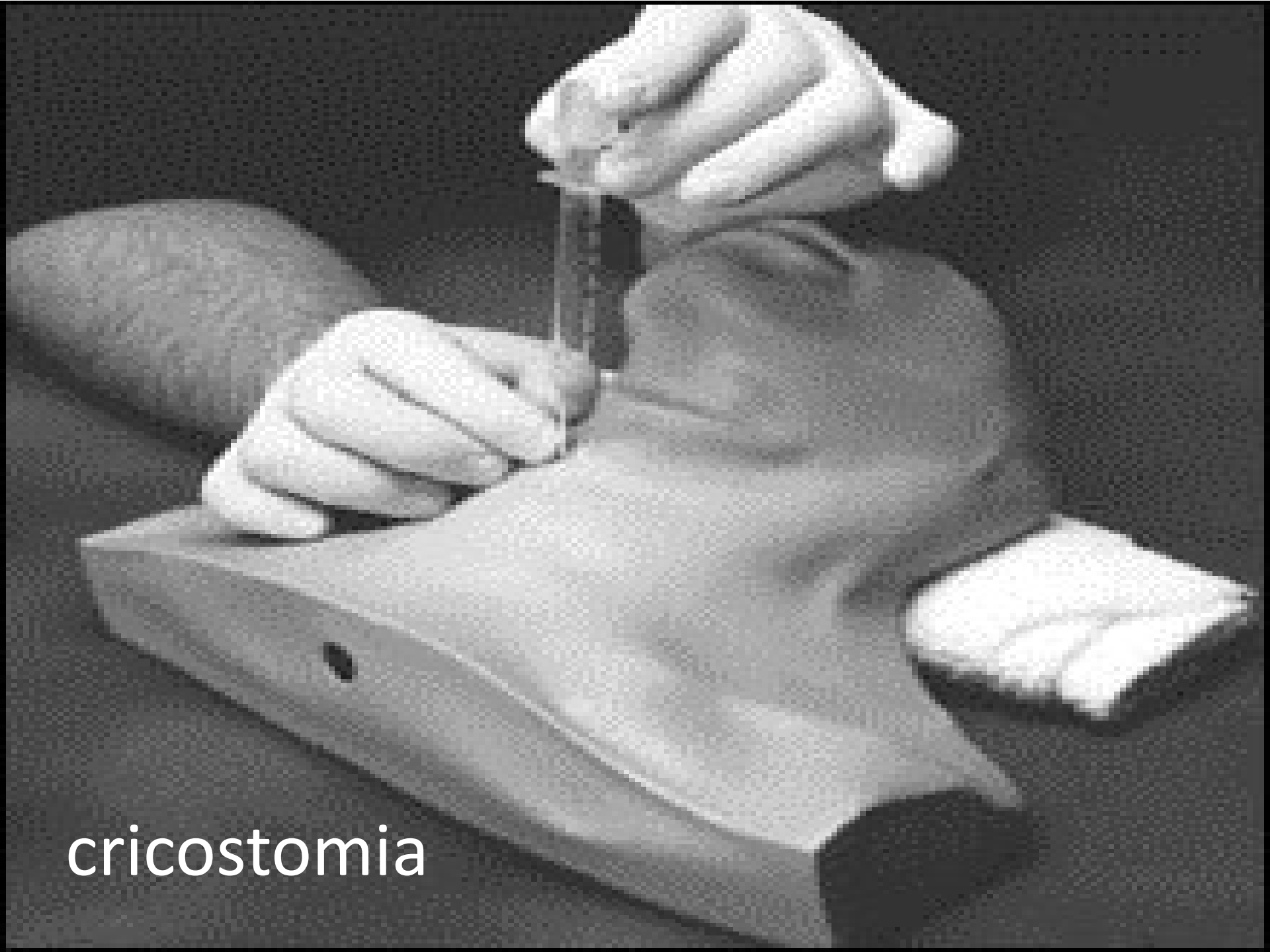
cricostomia



cricostomia



cricostomia

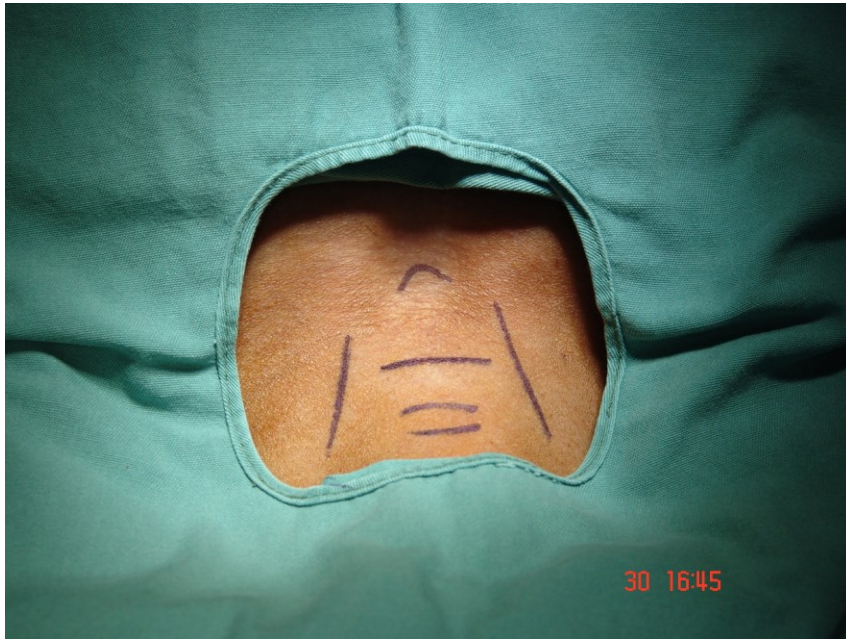


cricostomia



cricostomia

Traqueostomia



Traqueostomia

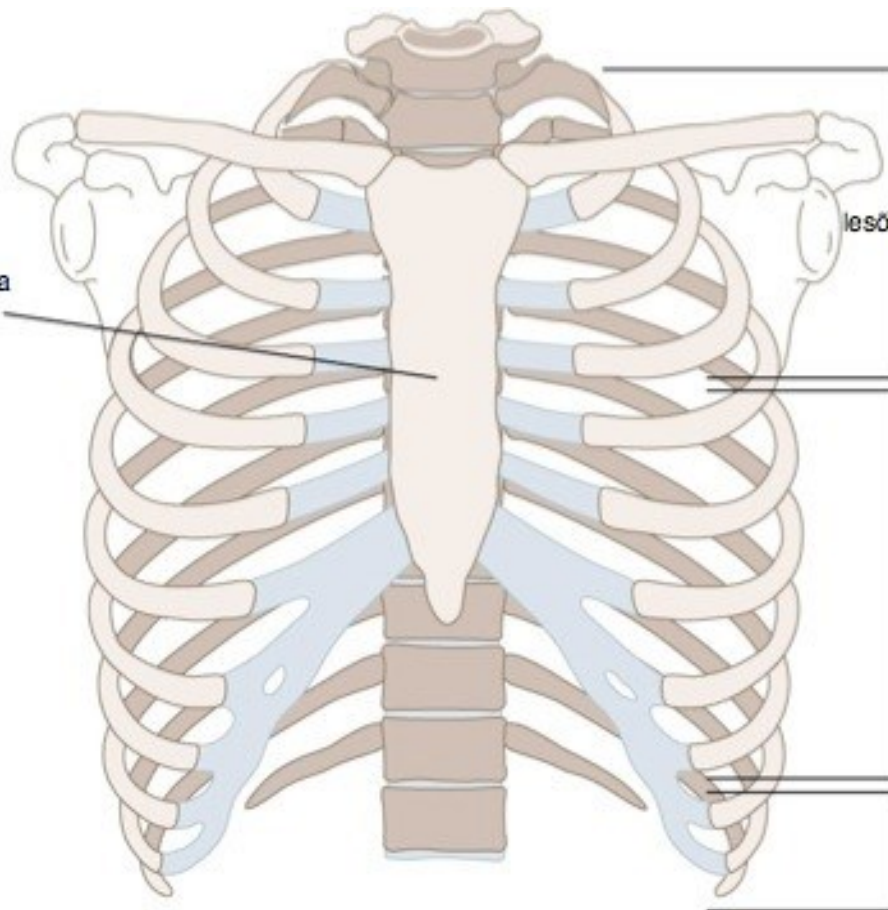


Traqueostomia





grande energia é necessária
para fraturar o esterno



as primeiras três costelas são protegidas
pela cintura escapular e é necessária
grande energia para fraturar

lesões associadas: aorta traquéia e brônquios

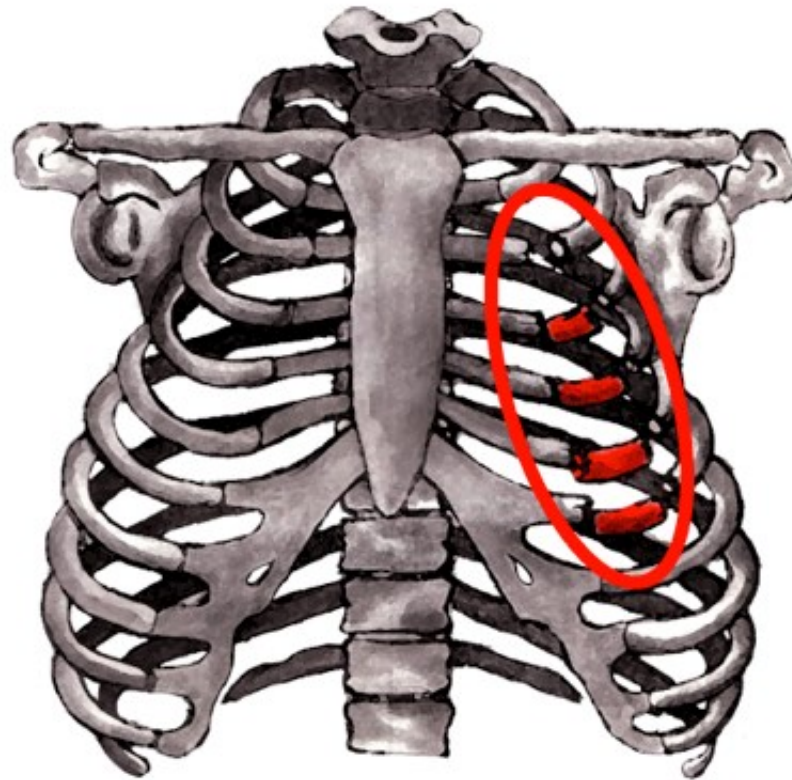
4 a 9 costelas locais mais frequentes
de fraturas

10 a 12 costelas mais móveis
lesões associadas abdominais

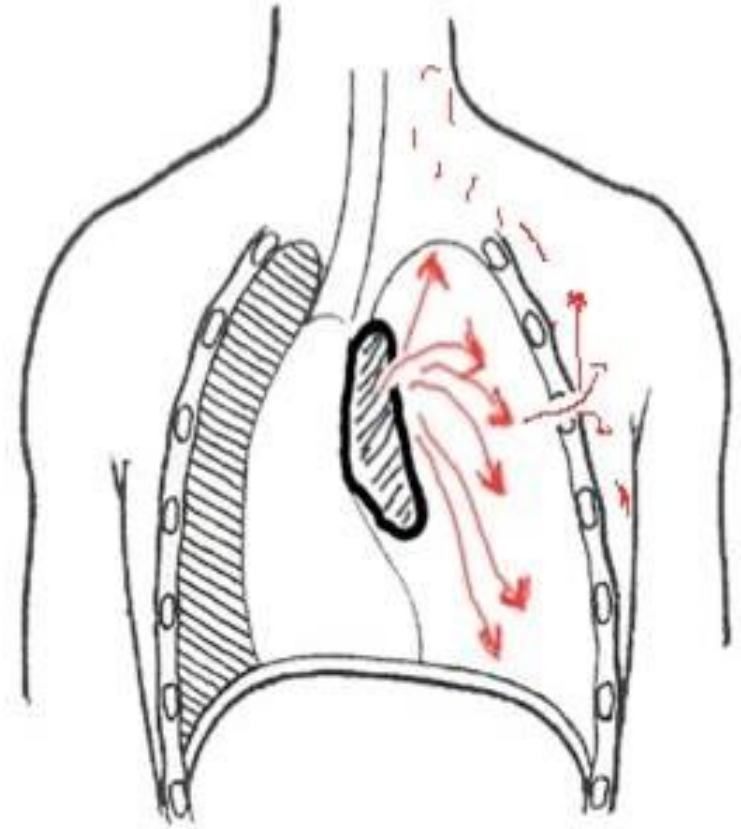
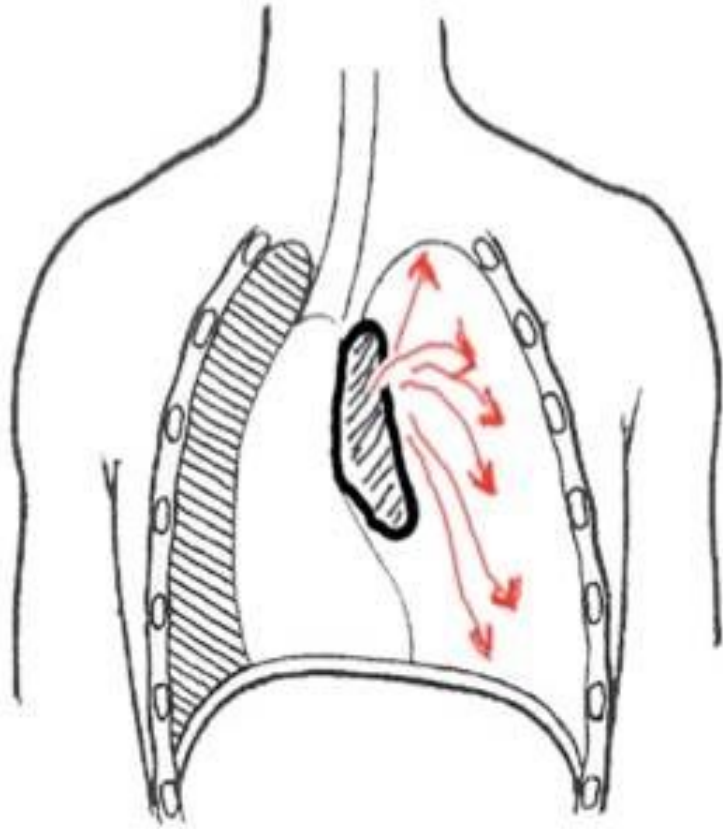
Trauma torácico



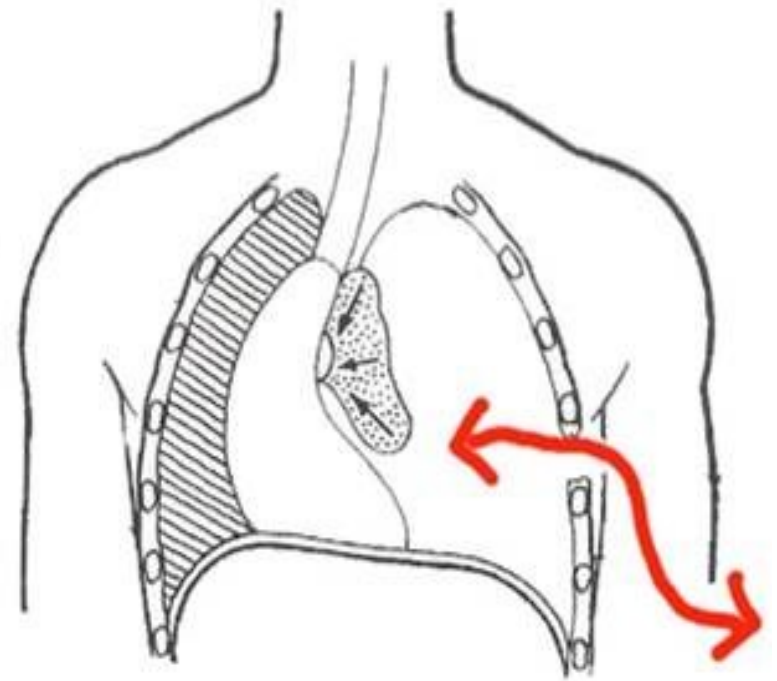
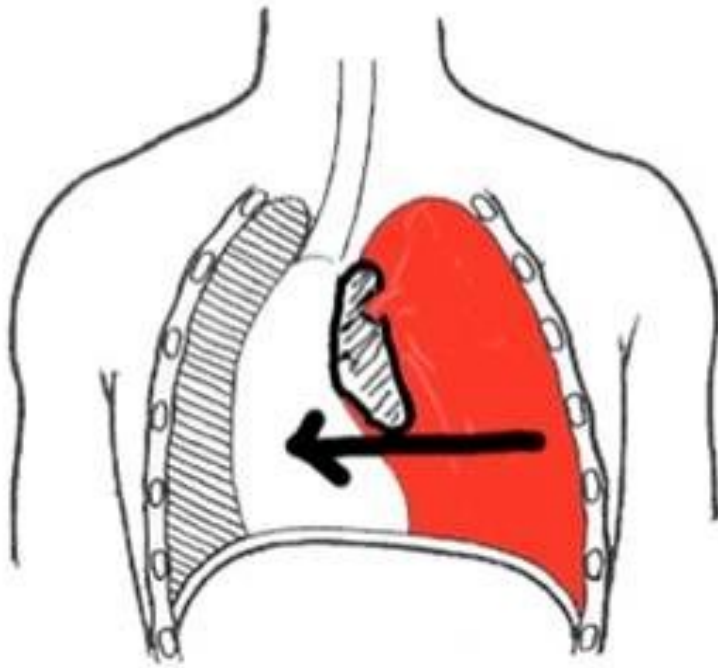
Trauma torácico



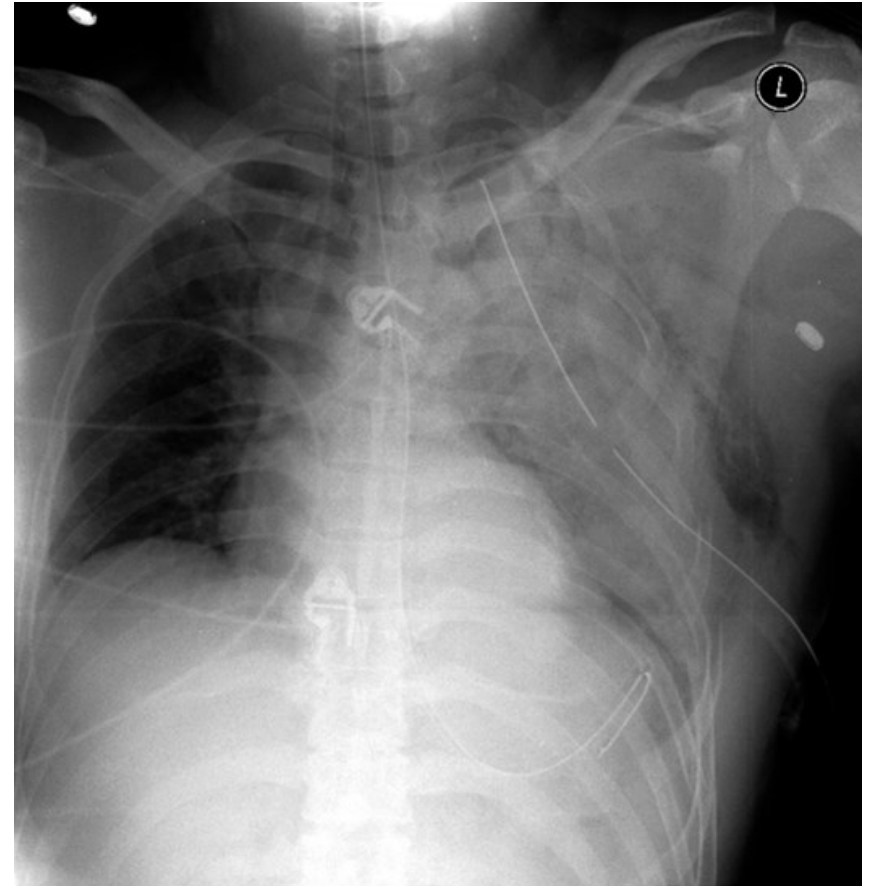
Trauma torácico



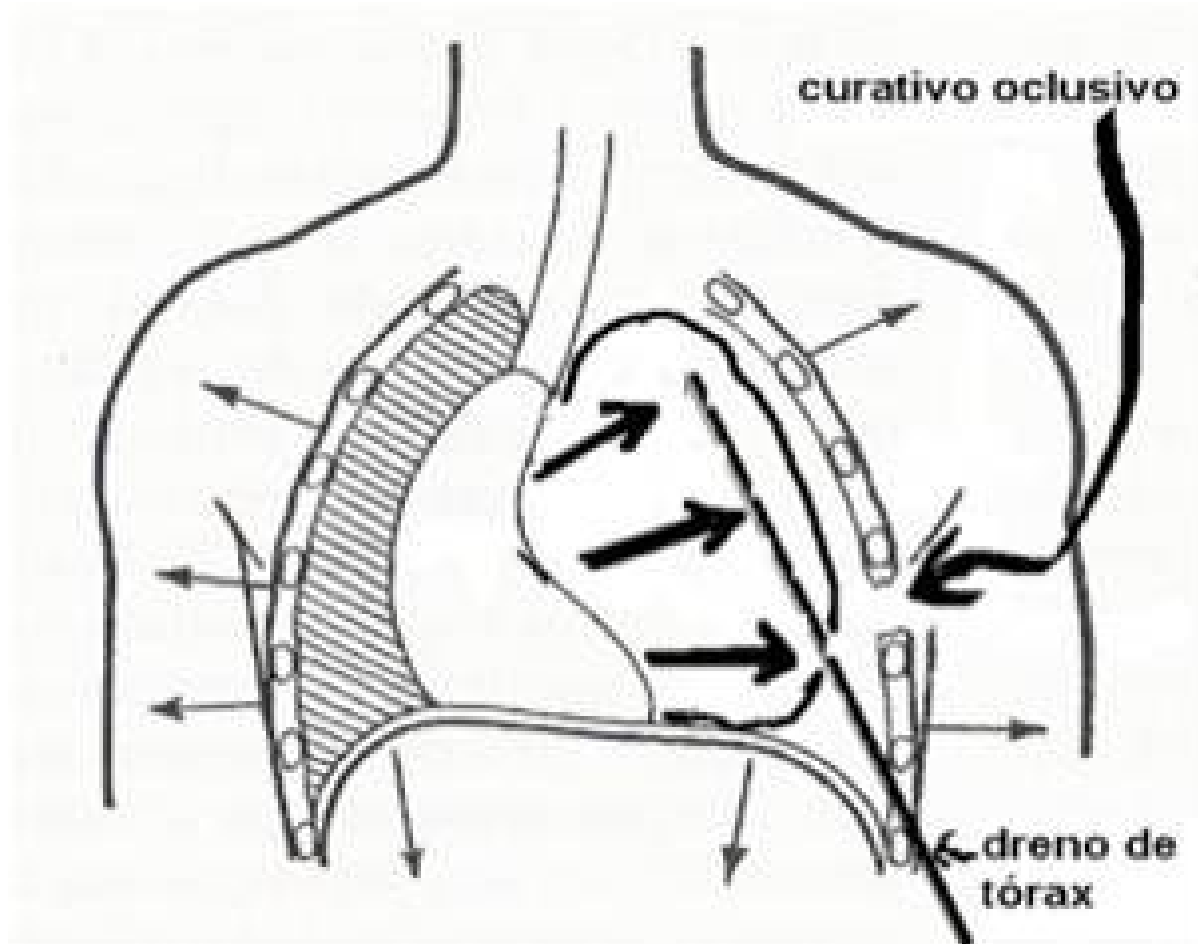
Trauma torácico



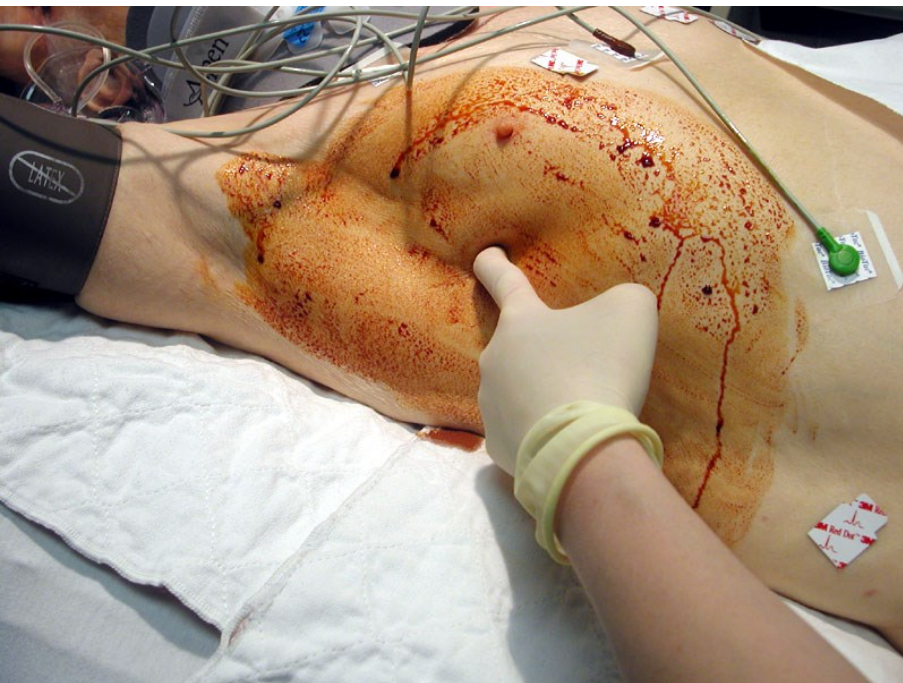
Pneumotórax hipertensivo



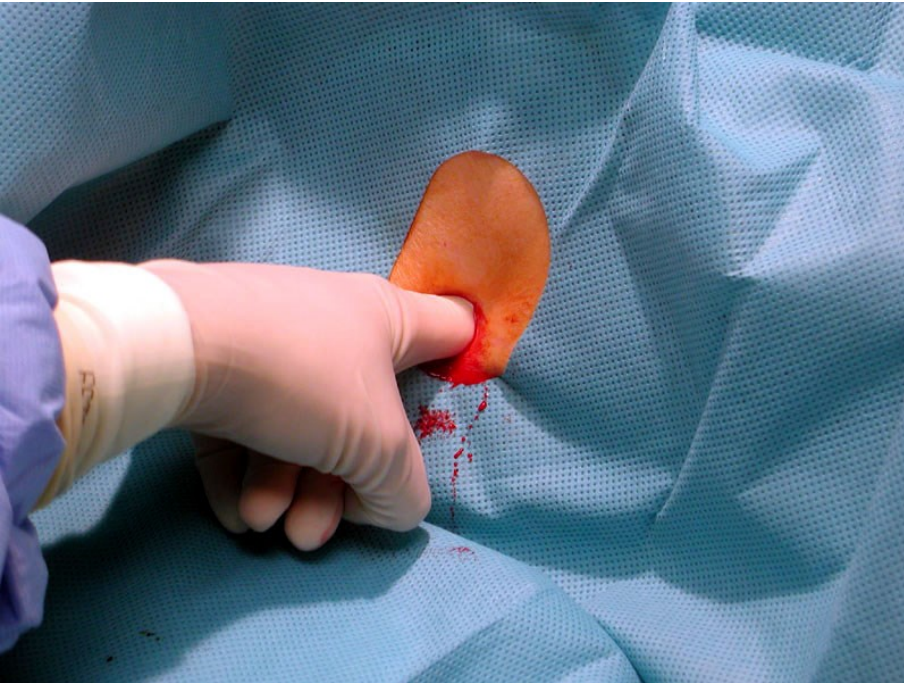
Drenagem de tórax



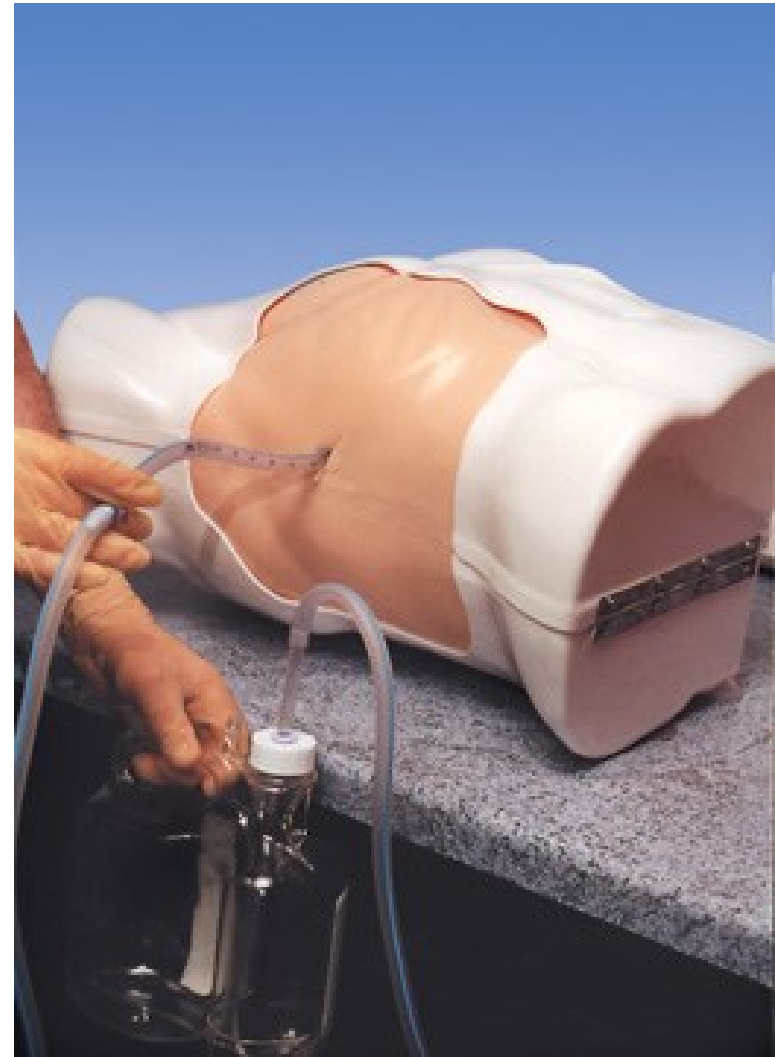
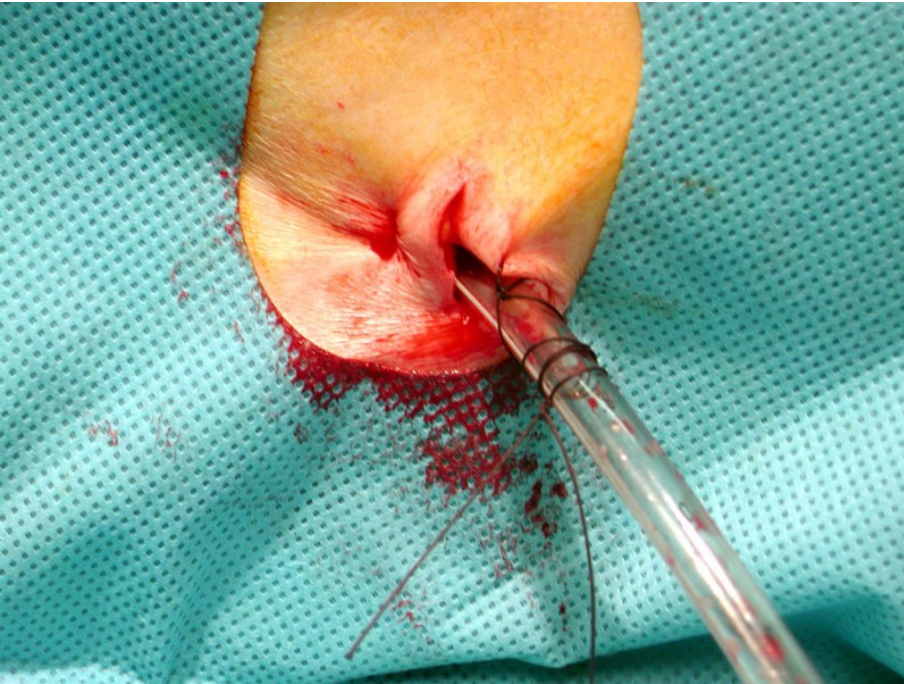
Drenagem de tórax



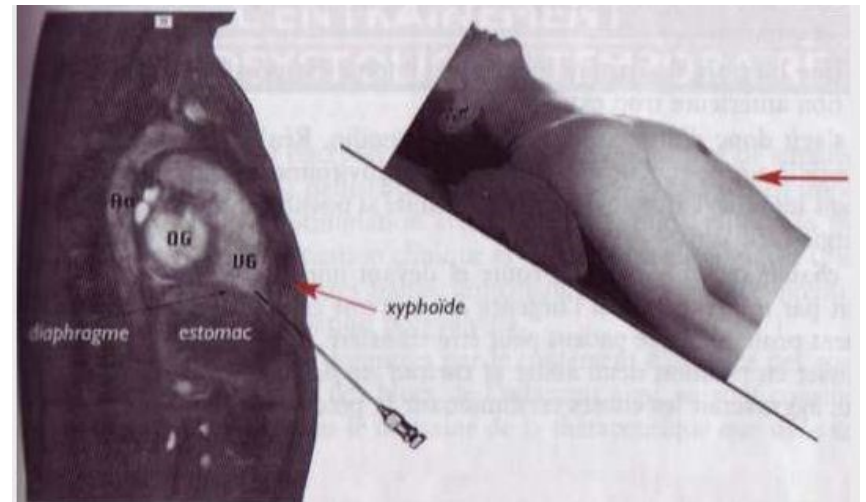
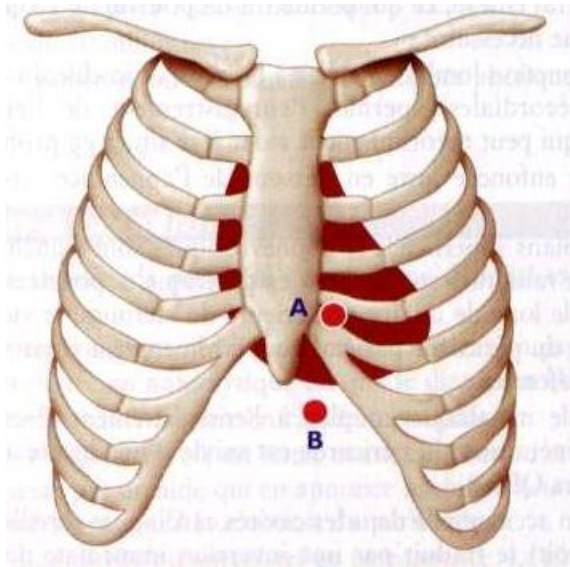
Drenagem de tórax



Drenagem de tórax



Tamponamento cardíaco



Acesso venosos

