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Difficult or failed tracheal intubation is an important cause of anesthetic-related morbidity and mortality. There are many causes of difficult intubation. Assessment of the patients may lead to preoperative recognition of a difficult airway. A careful history taking and physical examination will identify most patients who will be difficult to intubate. When the difficult intubation is anticipated, the problem is far simpler than when it is unexpected. Altered positioning of the patient may be of help in recognition and management. Unfortunately an unexpectedly difficult situation may still be met or the technique selected may be unsuccessful. So, to prevent such catastrophes, all necessary monitors and equipment should be available, needed to deal with a failed intubation. Adequate assistance, correct use of cricoid pressure and confirmation of tracheal intubation are fundamental to safe practice. Finally, this paper also shows the management protocol for suspected, unsuspected and failed intubation of the parturient protocol.