Airway management in a septic morbidly obese male with significant submandibular and sublingual abscesses presenting for emergent oral surgery: a comprehensive, multimodal approach

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A 60 year-old morbidly obese male with a history of vocal cord cancer status post chemotherapy and radiation presented with six days of right jaw pain was found to have large submandibular and sublingual abscesses. Patient was febrile, tachycardic, with a significant leukocytosis. Oral maxillofacial surgery opted for immediate surgical drainage of complex abscesses given patient's deteriorating clinical status. Airway examination significant for a one centimeter mouth opening, reduced thyromental distance, and large tongue. Patient successfully intubated using a modified awake fiberoptic technique. We demonstrate the importance of a team approach to the anticipated emergent difficult airway.