Title: Modifying an ill-fitting simple face mask

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Background:

Non-Operating Room Anaesthesia is a challenge for the anaesthetist due to the unfamiliarity of the environment and constraints in the availability of the equipment. Searching for a proper mask that fits paediatric patients especially with syndromes is extremely challenging. Within the available resources we decided to modify the existing face-mask.

Methods:

Our patient was a 1-month-old child weighing 2 Kg with Pierre Robin syndrome, pulmonary atresia, cephalohematoma, patent ductus arteriosus and atrial septal defect was posted for contrast enhanced cardiac computed tomography (CECT) of thorax under sedation. The plan was sedation with oxygen supplementation.

The existing face-mask was able to cover the nose and mouth of the child up to the chin leaving the remaining one third of the mask open to air which was sealed with cotton wrapped with paper tape to prevent undesirable air entrainment.

Results:

Non operating room anesthesia was successfully performed and patient had stable vitals throughout the procedure. The patient's clinical condition did not change during and after anesthesia. Post-procedure child was kept in the recovery room for half an hour and later shifted back to the ward.

Conclusion:

Modifying an equipment without compromising the safety and quality of patient care is more a necessity than a choice in a setup with limited resources.

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