

Ultrasound identification of the cricothyroid membrane

Submission date 21/03/2015	Recruitment status Stopped	☒ Prospectively registered ☐ Protocol
Registration date 02/04/2015	Overall study status Stopped	☐ Statistical analysis plan ☐ Results
Last Edited 12/03/2019	Condition category Respiratory	☐ Individual participant data ☐ Record updated in last year

Plain English summary of protocol

Background and study aims

Air containing oxygen, normally passes in and out of our nose or mouth to the lungs during normal breathing. In the event of rare and life-threatening emergency, this passage may become blocked or obstructed, and an alternative route that bypasses the nose or mouth is needed. This can be done with a small cut or window made in the front of the neck (the cricothyroid membrane) overlying the windpipe. Without this life-saving procedure, the patient will be starved of oxygen and may come to serious harm, or die. This is a very rare event, and many doctors will never perform even one of these in their lifetime. Correctly locating this point on the neck can be difficult, especially when a patient is very overweight. The current way of finding this point is by feeling for landmarks on the neck with fingers, known as "palpation". This is known to be more difficult when the patient is very overweight and the landmarks of the windpipe underneath the neck are less easy to feel. Another way to find this point on the neck is by using ultrasound. This is a machine that can produce an image or picture of tissues underneath the skin onto a screen, so that a trained doctor can see the correct spot to aim for, even if they may not be able to feel it by the finger method. Our study is going to look at which of these two techniques is more accurate.

Who can participate?

Anaesthetists working at University College London Hospital (UCLH).

What does the study involve?

Participants are randomly allocated into one of two groups. Those in group 1 are asked to locate the cricothyroid membrane using the finger "palpation" technique on an actor who is overweight. Those in group 2 are asked to locate the cricothyroid membrane using ultrasound on an actor who is overweight. Assessments are made as to how quickly and easily the membrane is located.

What are the possible benefits and risks of participating?

There are no specific benefits for the participants, though they will receive education on ultrasound guided interventions in the neck. There are no risks to participants.

Where is the study run from?

University College London Hospital (UK)

When is the study starting and how long is it expected to run for?
May 2016 to July 2016

Who is funding the study?
University College Hospital NHS Trust (UK)

Who is the main contact?
Dr Kirstie McPherson

Contact information

Type(s)
Scientific

Contact name
Dr Kirstie McPherson

ORCID ID
<https://orcid.org/0000-0002-8366-4886>

Contact details
Dept of Anaesthetics
UCLH
235 Euston Road
London
United Kingdom
NW1 2BU

Additional identifiers

Protocol serial number
KMP1

Study information

Scientific Title
Randomised control trial of ultrasound versus palpation-technique in identifying the cricothyroid membrane (CTM) in simulated can't intubate, can't ventilate scenario

Study objectives
The principle research question is which of two methods is more accurate at correctly identifying the spot on the neck, under which lies the windpipe. At this point a "cut" or window can be made accessing the windpipe, providing a route for air to pass down into the lungs, bypassing the nose or mouth, where a blockage or obstruction lies. The first method relies on examining the neck with hands and fingers to locate this spot correctly, the second uses ultrasound, a machine that produces a picture or image of structures below the skin and invisible to the human eye. We will measure how accurate both methods are by randomly allocating anaesthetists to one of two groups (finger palpation and using ultrasound). We will ask them to find the correct point on the neck of an actor, marking this with "invisible ink". An experienced doctor will have marked this

area beforehand (with invisible ink), enabling a measurement of how accurate and close to the expert's mark the subject has been using one of either techniques.

Ethics approval required

Old ethics approval format

Ethics approval(s)

On pre-review by ethics, it was decided that full ethical review was not required

Primary study design

Interventional

Study design

Single-centre randomised controlled trial

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Can't intubate, can't ventilate scenarios

Interventions

Doctors are randomly assigned to one of two groups.

Group 1: Participants are asked to locate the cricothyroid membrane using the finger "palpation" technique on an actor who is overweight

Group 2: Participants are asked to locate the cricothyroid membrane using ultrasound on an actor who is overweight

Intervention Type

Device

Primary outcome(s)

Ease of identification of the cricothyroid membrane with ultrasound in a simulated CICV scenario.

Key secondary outcome(s)

Speed of identification of cricothyroid membrane using ultrasound

Completion date

01/07/2016

Reason abandoned (if study stopped)

Objectives no longer viable

Eligibility

Key inclusion criteria

Anaesthetists working at UCLH

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

Unwilling to consent to taking part

Date of first enrolment

01/05/2016

Date of final enrolment

01/06/2016

Locations

Countries of recruitment

United Kingdom

Study participating centre

University College Hospital

235 Euston Rd

London

United Kingdom

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Sponsor information

Organisation

University College Hospital NHS Trust (UK)

ROR

<https://ror.org/042fqyp44>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

University College Hospital NHS Trust (UK)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Available on request