Step by Step© TRACHEOBRONCHIAL ANATOMY

Flexible Bronchoscopy Step by Step®

Video exercises to learn bronchoscopy skills

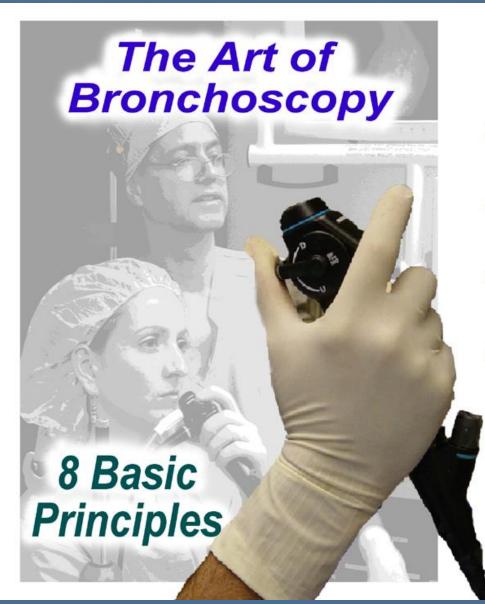
Prepared By Bronchoscopy International

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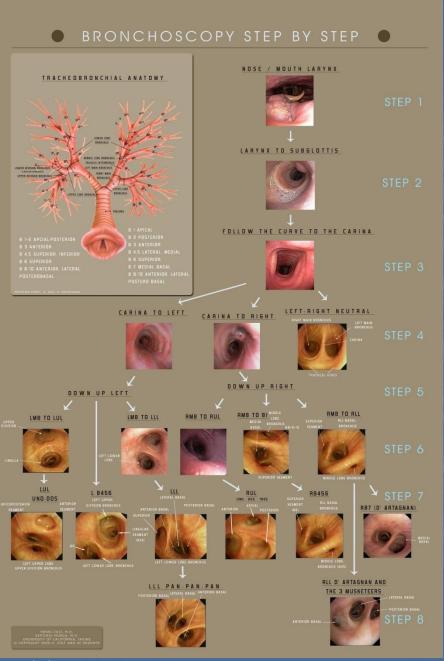
Main Objectives

- To learn bronchoscopic techniques using an approach similar to learning to dance, play tennis or play a musical instrument.
 - To develop "muscle memory"
 - To develop a "systematic approach" to bronchoscopic inspection.
- To learn how to handle the flexible bronchoscope and to accurately identify and enter lobar and segmental bronchial segments with ease.



- 1. The bronchoscope wants to do the bronchoscopy
- 2. Stay in the midline (Get off the wall).
- 3. Moderation in everything; slow down, think, act.
- 4. If you don't know where you are you probably shouldn't be there
- 5. Force is wrong. Return to what you know; then move on and grow.
- 6. Slow down to finish faster.
- 7. Treasure basic values: peace, harmony and kindness
- 8. You and the bronchoscope are one





8 steps

Bronchoscopy exercises

Group 1	Nose/mouth to larynx Larynx to subglottis Follow the curve to the carina	Carina to left Carina to right Left right neutral	Down-up right Down-up left
Group 2	LMB to LLL LMB to LUL	RMB to RLL RMB to BI RMB to RUL	Larynx to RLL Larynx to LLL
Group 3	LLL pan pan pan LUL uno dos LLL B6-8910	LB456 RB456 RLL medio-basal (D'Artagnan)	RLL D'Artagnan and the three musketeers RUL uno dos tres

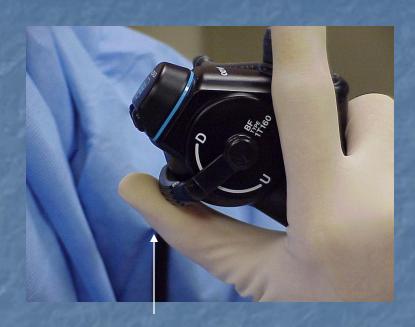
Background A: Flexion-Extension



Extension

Flexion

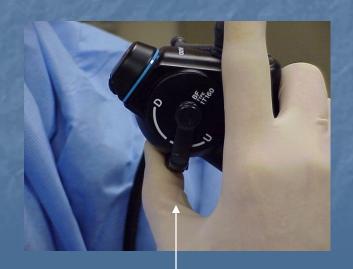
Background B: Down-Neutral-Up positions



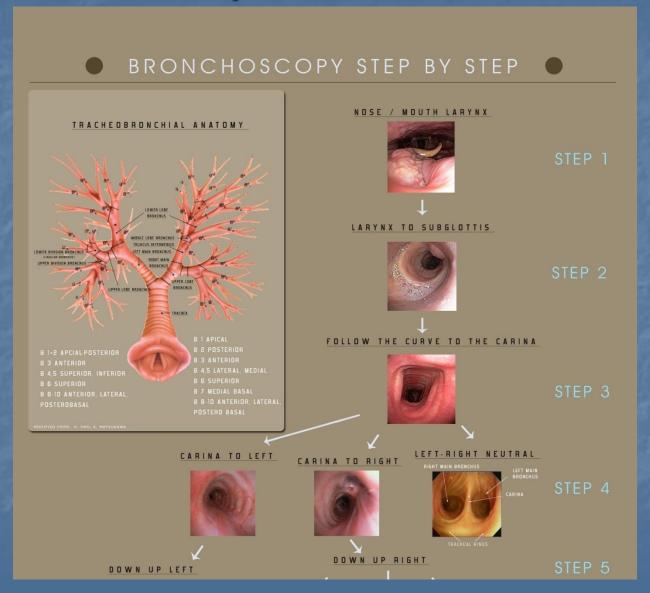
Lever down



Lever straight (Neutral)



Group 1 Exercises



Step 1: nose to larynx

- The scope is advanced from the nose to the larynx.
- This step includes local anesthesia.

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Click to continue



From the head

Step 2: larynx to subglottis

- From the larynx the trachea is entered to the subglottic area.
- If from the head: once the vocal cords are passed the scope is slightly flexed downwards.
- If from the front: once the vocal cords are passed the scope is slightly flexed upwards.

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From the front



Step 3: Follow the curve to the carina

- The Trachea is not a "straight pipe";
- It deviates posteriorly and slightly to the right when approaching the main carina.

Click to continue



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From the head

Step 4a: Carina to left main bronchus

From the neutral position the LMB is entered just by twisting the wrist to the left and advancing for 1 -2 cm.



From head

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Step 4b: Carina to right main bronchus

From the neutral position the RMB is entered just by twisting the wrist to the right and advancing the scope for 1 -2 cm.



From head



Step 4c: Left-right-neutral

Click to continue

From head

From the neutral position the left and right main bronchi are entered alternatively just by twisting the wrist and advancing the scope for few cm.





Step 5a: Down-up-left main bronchus

The scope is slowly advanced the pulled back up the LMB while always keeping it in the middle of the airway lumen.

From the front





Step 5b: Down-up right main bronchus

The scope is slowly advanced down the RMB to RLL and pulled back upwards while always keeping it in the middle of the airway lumen.

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From the front



Group 2 Exercises



Step 6a: Left main to left upper lobe bronchus

From the LMB the scope is advanced to the entrance of the LUL bronchus.

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From the front



Step 6b: Left main to left lower lobe bronchus

The scope is advanced down the LMB to the entrance of the LLL bronchus.

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From the front



Step 6c: Right main to right upper lobe bronchus

 The scope is advanced down the RMB then with the wrist twisted 60 degrees from midline the scope is flexed up to the entrance of RUL.

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From the front



Step 6d: Right main to bronchus intermedius

From the carina advance the scope down the RMB to the distal bronchus intermedius and visualize the entrance to RB456 and the basal pyramid.

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From the front



Step 6e: Right main to right lower lobe bronchus

Advance the scope from the carina to the entrance of the RLL while always keeping it in the midline.

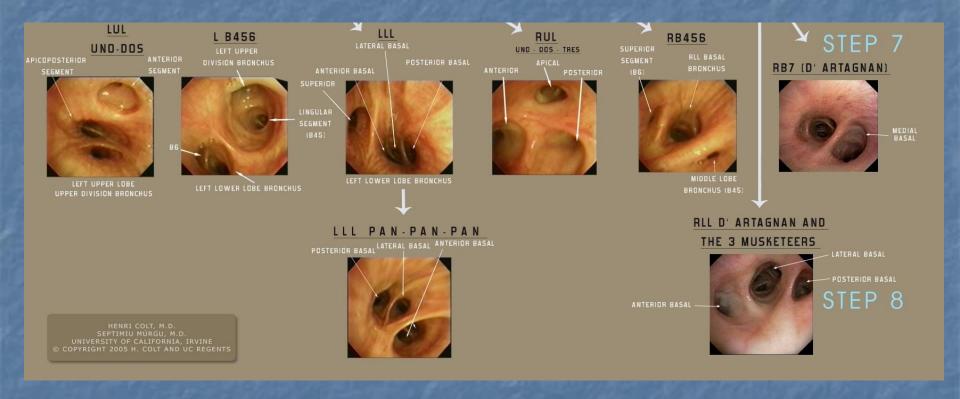
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From the front



Group 3 Exercises



Step 7a: Left upper lobe uno dos

From the carina, the scope is advanced to LUL entrance; there, just by thumb movement, the lingula and upper division bronchus are visualized.

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From the head



Step 7b: Left before five six (LB 456)

- From the LMB, the lingula is entered, then the scope is pulled back into the distal LMB and the scope is advanced into the superior segment of the LLL.
- ! Wrist movements are "in the mirror"

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From the head

Step 7c: Left B6-8,9,10

With the scope at the LLL bronchus entrance, the superior segment is entered, then alternately, the antero, lateral and postero-basal segments of the LLL are entered.

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Click to continue



From the head

Step 7d: Right upper lobe uno-dos-tres

From the RMB the scope is advanced and flexed up into the RUL bronchus where just by wrist and thumb movements the three segments are visualized; then the scope is withdrawn to the main carina.



From the head



Step 7e: Right before five six (RB 4,5,6)

- From the distal bronchus intermedius, the RML and superior segment are entered alternatively;
- ! Wrist movements are "in the mirror".

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Click to continue



From the head

Step 7f: Right medial basal (RB7) (d"Artagnan)

 From the distal bronchus intermedius the scope is advanced and the medio-basal segment is entered.

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Click to continue



From the front

Step 8a: Left lower lobe basal pyramid

 From the entrance of the LLL bronchus go in and out of the 3 basal segments, then withdraw the scope to the carina. Pan - Pan - Pan

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Click to continue



From the head

Step 8b: Right lower lobe basal pyramid (D'Artagnan and the three musketeers)

From the carina advance the scope to the RLL bronchus entrance and then enter the medial-basal segment, pull back and then examine the other three segments of the basal pyramid.

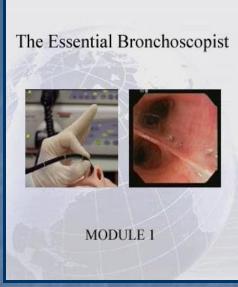
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From the front



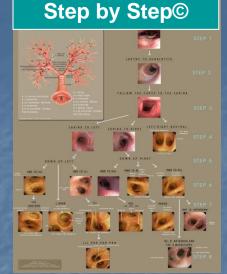
STAY OFF THE WALL

This presentation is part of a comprehensive curriculum for Flexible Bronchoscopy. Our goals are to help health care workers become better at what they do, and to decrease the burden of procedure-related training on patients.

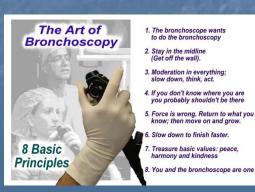


A new curriculum

Assured competency and proficiency



- Web-based Self-learning study guide.
- 2. Computer-based simulations, didactic lectures, and image encyclopedia.
- 3. Bronchoscopy step-by-step©: Practical exercises, skills and tasks, competency testing.
- 4. Guided apprenticeship.
- Learning the art of Bronchoscopy.



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Thank you