# UPPER AIRWAY

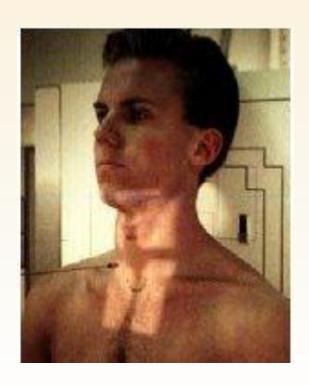
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## **AP Upper Airway**

- For pathology (e.g. soft-tissue swellings) involving air-filled larynx and the trachea
- and their relation to thyroid, and the upper esophagus.

#### **Patient and Part Position**

- Patient sitting or standing AP with MSP centered to the center of the Bucky.
- Back of the head and shoulders against film, chin raised slightly
- Exposure factor: 75-80 KV to visualize soft tissue, with 40 inches(100 cm) SID.
- Film: 24x30 cm (10x12 in).
- CR: horizontally 90° to film holder
- **CP:** At level of T.1-2
- (1 inch above the jugular notch)
- NB/ Exposure should be during slow inhalation to fill the trachea with air.



## **Lateral Upper Airway**

- For pathology (e.g. soft-tissue swellings) involving air-filled larynx and the
- trachea and their relation to thyroid, and the upper esophagus.
- Patient and Part Position
- Patient seated or standing upright in the lateral position
- Patient arms positioned downside with dropping t shoulders back.
- chin raised slightly without body rotation
- 75-80 KV to visualize soft tissue
- Film: 24x30 cm (10x12 in).
- CR: horizontally 90° to film holder
- CP: C6-C7 Midway between thyroid
- cartilage and jugular notch, level of C6-C7
- NB/ Exposure should be during slow inhalation to fill the trachea with air.



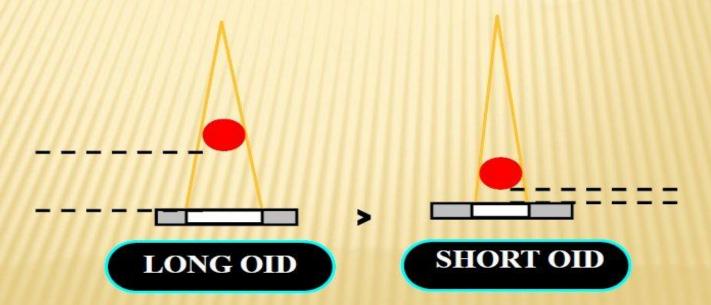
### To overcome magnification in lateral upper airway

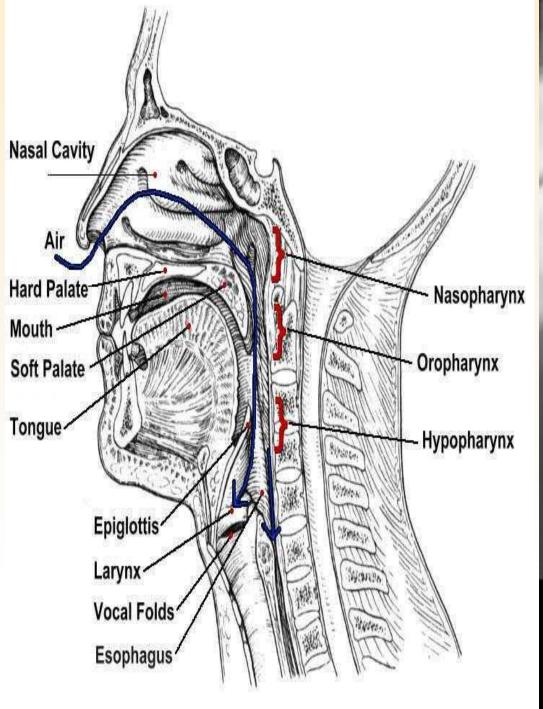
• SID = 180 cm

Magnification effect coming from increase OID (object image distance)

### SIZE DISTORTION

- 1. DISTANCE BETWEEN OBJECT & IMAGE (OID or OFD)
  - + use short OID to obtain truest size
  - + ↑ OID = ↑ OBJECT SIZE







Lateral airway x-ray shows normal anatomy. Notice the wafer-thin epiglottis.



