



Welcome to the inaugural issue of Snooze News. As busy practitioners, you want practical anesthesia advice. In this series of topical newsletters, you'll find helpful hints about anesthesia equipment, information about anesthesia/analgesia products and advice on how to safely manage patients with unusual anesthesia and pain relief needs. I will also acquaint you with my anesthesia consulting practice and how I can assist you in your patient care. I hope to show you how

timely anesthesia expertise pays dividends in rapid and comfortable anesthesia recovery, free of mishaps, unexpected complications or expense. This makes for happy patients and clients, thereby assisting you in the smooth running of your practice.

### A look at the F circle breathing circuit

Many of you now use the convenient and lightweight F breathing circuit for gas anesthetic delivery. This is the "coaxial" circuit with the green hose traveling within a clear outer hose. A coaxial breathing circuit always involves a hose within a hose. The F circuit is similar in appearance to the Bain circuit, another example of a coaxial breathing circuit. There are a few important features of the F circuit that you should be aware of in order to use it safely and effectively:

1. Although it looks like a Bain **non re-breathing** circuit, it is a **rebreathing** circuit designed to function with a soda lime canister.
2. There is a **maximum** patient size for this circuit: If you place a 9.5 mm or larger endotracheal tube (ett) in a patient, you should deliver gas anesthesia through the traditional re-breathing circuit with a Y piece. The inner hose of the F circuit has the diameter of a 9.5 mm ett. If the patient's airway

accommodates a larger size ett, the patient will have to breathe against resistance of the narrower inner hose. This resistance to breathing takes on greater significance with larger patients. Is there a minimum patient size for the F circuit? I use it for patients above 5 kg body weight because of the significant amount of dead space present.

3. It is possible to accidentally attach the F circuit onto your breathing circle backwards. To avoid this, simply color-code the ends of the hoses and the limbs of the circle with corresponding pieces of colored tape. Electrical tape is most effective. Matching up the colours will prevent accidental attachment of the inspiratory end of the F circuit to the expiratory end of the circle.

To determine which is the inspiratory side of your circle, simply assemble a set of breathing hoses and reservoir bag onto your anesthetic machine, fill the reservoir bag with some oxygen and then squeeze the bag. The valve that lifts

when you squeeze is positioned on the inspiratory side. The other side is the expiratory side.

**Future Snooze News topics:** Defining dead space, NSAID's and anesthesia, Revisiting nitrous oxide, Blood pressure monitoring, Proper ett length, Cleaning of facemasks, ett's and breathing tubes, Anesthesia technician certification program, Epidural site hair re-growth.

To reach me, call 604-838-1825 in the B.C. Lower Mainland, 800-338-9986 in the rest of North America.

You can send me an email at [n.brock0945@YAHOO.COM](mailto:n.brock0945@YAHOO.COM). Either way, I enjoy hearing from fellow practitioners. I provide telephone consultations as well as mobile anesthesia delivery.

Nancy Brock, DVM  
Diplomate American College of  
Veterinary Anesthesiologists  
Veterinary Anesthesia Northwest  
[www.nancybrockvetservices.com](http://www.nancybrockvetservices.com)