

25%. The authors suggest that failure to recognize esophageal placement could occur if gastroesophageal reflux or hiatus hernia allow gas to be aspirated from the stomach, if the esophageal tube is passed into the stomach, or if the esophagus doesn't readily collapse and form a seal around the tube. Failure to confirm tracheal tube placement could occur if young children's more flexible tracheal rings fail to hold the airway rigidly open or if the tracheal mucosa collapses over the tube when negative intraluminal pressure is applied.

Relying on the EDD to confirm proper placement of an ET tube in young children may be dangerous.

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References

1. Rhine DJ, Morrow DJ. Is the esophageal detector device or end-tidal CO₂ measurement superior in confirming endotracheal tube placement? *CJEM* 1999;1(2):103-4.
2. Haynes SR, Morton NS. Use of the oesophageal detector device in children

under one year of age. *Anaesthesia* 1990; 45:1067-9.

Propofol for sedation

To the editor:

In the July issue of *CJEM*, Innes stated that he was unaware of any Canadian emergency physicians who are permitted to use propofol.¹ In fact, we have used propofol for procedural sedation and as an induction agent for intubation since 1995. Among our emergency physicians it has become the agent of choice (in combination with appropriate analgesia), particularly for orthopedic procedures. Although we have not been tracking its use, we are unaware of any adverse outcomes. Due to its rapid onset, short duration, and ease of titration, we find it easier to employ when one physician performs the procedure while another manages the sedation.

We have been performing policy-driven conscious sedation since the mid-1980s. Our procedural sedation policy was written in consultation with our Anesthesia Department and has their approval. Although the policy does

not refer to the use of specific agents, our anesthetists have not objected to our use of propofol. In fact, they (and our surgeons) have grown to expect it and depend on it!

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Reference

1. Innes G. Emergency department sedation guidelines: a tale of two specialties [editorial]. *CJEM* 1999;1(2):88,136-9.

Correction

In Dr. Del Donald's Letter to the editor¹ in the July 1999 issue of *CJEM*, we mistakenly gave Sudbury, Ont., as Dr. Donald's city of practice. Dr. Donald practises in Sarnia, Ont. We apologize for this error.

Reference

1. Donald D. Emergency department sedation [letter]. *CJEM* 1999;1(2):92.

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