Inhaled foreign bodies are more likely to enter the right main bronchus and then pass into the apical bronchus of the right lower lobe - the first one that points posteriorly.
BRONCHOPULMONARY SEGMENTS

**Mnemonic:** Starting on right at upper lobe, working down right lobe then down left lobe the segments are as follows: **APALM APALM APAIS APAL**

**PARASYMPATHETIC** (vagus)
- Vasodilatation
- Bronchoconstriction
- Increase glandular secretions
- Sensation

**SYMPATHETIC** (chain)
- Vasoconstriction
- Bronchodilatation (beta 2)
- Suppress glandular secretion (alpha)

Lymph: Hila nodes then carina then tracheobronchial then thoracic duct and right lymphatic duct

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**BLOOD SUPPLY**
- Bronchial arteries from aorta
  - (2 on left, 1 on right)

**VENOUS DRAINAGE**
- On right -azygos, left - hemiazygos.
- Also a little via bronchial veins and pulmonary veins

**NERVE SUPPLY**
- Pulmonary plexus at hilum

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**EMERGENCY ACCESS TO TRACHEA**

**FORMAL TRACHEOSTOMY**
- Not usually an emergency.
- Needs full anaesthetic. Ideal for temporary or permanent intubation. Hole cut in 2nd & 3rd tracheal rings, usually after dividing thyroid isthmus. Inferior thyroid veins can be troublesome

**CRICOTHYROIDOTOMY**
- Quick, relatively easy stab through cricothyroid membrane. Insert any small round airway such as a biro casing. Anaesthetic not essential. Life saving