



Corrigendum to: Clinical roles of point-of-care ultrasonography in airway management

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We found some errors in the main text and figure legends in the original article published in the October issue of *Anesthesia and Pain Medicine* (2025;20[4]:318-328).

1. In the first paragraph of “PROBE SELECTION AND PATIENT POSITIONING” section (p. 319),

Original version: In contrast a high-frequency curvilinear probe is preferred.

Corrected version: In contrast, a low-frequency curvilinear probe is preferred.

2. In the third paragraph of “Cricothyroid level” section (p. 320),

Original version: In addition to these four anatomical levels, the suprasternal view, obtained using a curvilinear probe, provides valuable information on the position of the trachea and esophagus, as well as adjacent structures, such as the thyroid gland, sternocleidomastoid muscles, and cervical vessels. In the transverse plane, the trachea appears as a hyperechoic semicircular structure with posterior reverberation artifacts.

Corrected version: In addition to these four anatomical levels, the suprasternal view provides valuable information on trachea and esophagus positions and adjacent structures, including the thyroid gland, sternocleidomastoid muscles, and cervical vessels. Both types of probes (linear and curvilinear) can be used. Probe choice should thus depend on intended purpose. In the transverse plane, the trachea appeared to be a hypoechoic semicircular structure with posterior reverberation artifacts.

3. In the Fig. 4. (p. 321),

Original version: (A) Longitudinal plane view

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Corrected version: (A) Transverse plane view

4. In the second paragraph of “FOCUS FOR EMERGENCY AIRWAY INTERVENTION” (p. 322),

Original version: At the thyrohyoid level in the transverse plane, the thyrohyoid membrane appears as a hypoechoic band between the thyroid cartilage and the hyoid bone. Slight caudal movement of the probe reveals the vocal cords as hyperechoic structures.

Corrected version: At the thyrohyoid level in the transverse plane, the thyrohyoid membrane appeared as a hyperechoic band between the thyroid cartilage and the hyoid bone. A slight caudal movement of the probe revealed that the vocal cords were hypoechoic.

The authors apologize for any inconvenience this may have caused.