Chapter 2
Case 2: Stick Out Your Tongue

As an “el toro” anesthesiologist in Oslo, Norway in 1970, I watched with interest a visiting Australian anesthesiologist (Dr. Sid J. Aidinis) waking up patients. At the end of every anesthetic, after the endotracheal tube was removed, he would say in Norwegian: “Stikk ut tongen din” (Stick out your tongue). The patient if awake enough would always oblige. I asked him: “Why don’t you just ask him to squeeze your hand?” He looked at me and said:

There are several reasons for why you want the patient to stick out their tongue at the end of a general anesthetic:

1. The patient shows that he/she can follow a command. Of course you could get the same answer with squeezing your hand, but there are more reasons.
2. The patient indicates that he/she can protect their airway. This is something hand squeezing can’t do.
3. Early studies on clinical monitoring of the neuromuscular function have suggested that protruding the tongue is a good assessment of return of neuromuscular function [1].
4. Sticking out your tongue is a very unusual request. It would be highly unlikely for someone to stick out their tongue unless asked to do so. Furthermore, squeezing your hand has a higher chance of happening by chance than protruding the tongue would.
5. The 12 cranial nerve is intact (a minor point) but there is another reason which is probably the most important one of all. Can you, John, tell me what that is?

Question

I could not and now I ask you, the reader, to come up with the answer. What do you think the other reason is?
## Solution

Sid said:

When the patient sticks his/her tongue, at your request, at the end of an anesthetic this is something you and everyone in the room can see. Hence, in a court of law, everyone in the operating room saw that the patient was awake and was following command at the end of the surgery. Remember that the patient squeezing your hand is something ONLY you can feel.

## Recommendation

Asking your patient to stick the tongue out is a quick way to establish if the patient is awake and is following commands. It may also be a good measure of return of adequate muscle strength [2, 3]. But the most important reason is related to the fact that everyone can concur that this patient was awake at the end of the anesthetic.

In my anesthetic practice, I always ask my patients to stick their tongue out. When they do, it gives me great comfort.

## References

Case Studies of Near Misses in Clinical Anesthesia
Brock-Utne, MD, PhD, FFA(SA), J.G.
2011, XVI, 236 p. 4 illus., Softcover
ISBN: 978-1-4419-1178-0