

# Anterior approaches to the cervical spine

anterior [odontoid screw](#)

2. C1–3 (upper cervical spine):

a) [transoral approach](#): including [odontoidectomy](#)

b) extrapharyngeal approaches: use [nasotracheal intubation](#) (so that the mandible can be completely closed) through the contralateral nares. The head is slightly extended and is rotated 15° to the contralateral side.

Avoid any oral tubes

- medial extrapharyngeal approach: medial to carotid sheath. Provides a more anterior position than the lateral [retropharyngeal approach](#). Structures encountered: branches of external carotid artery, upper laryngeal nerves, [hypoglossal nerve](#)

- lateral retropharyngeal approach: only the spinal accessory nerve is encountered

3. C3–C7: standard anterior cervical discectomy approach

a) For 1 or 2 level ACD For 1 level corpectomy, a horizontal incision is usually employed

b) For more levels, a vertically oriented incision may be preferred to facilitate access

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