

## Obstructed Airway (Adult and Pediatric)

### CFR and All Provider Levels

1. If the patient is conscious and can breathe, cough, speak, or cry; encourage the patient to cough
2. If the patient is unconscious or cannot breathe, cough, speak, or cry; perform airway maneuvers or CPR, as per current AHA guidelines
3. ABCs and vital signs
4. Airway management and appropriate oxygen therapy

### CFR STOP

### EMT

5. Request ALS assistance
6. Transport
7. Perform obstructed airway maneuvers enroute to the hospital as needed

### EMT STOP

### Paramedic

8. Perform direct laryngoscopy and attempt to remove the foreign body with Magill forceps
9. Perform advanced airway management as needed
10. If intubation is confirmed with direct visualization, but unable to ventilate:
  - 10.1 Note the depth of the endotracheal tube
  - 10.2 Deflate the endotracheal tube cuff, if using a cuffed tube
  - 10.3 Advance the endotracheal tube to its deepest depth
  - 10.4 Return the endotracheal tube to its originally noted depth
  - 10.5 Re-inflate the endotracheal tube cuff, if using a cuffed tube, and attempt ventilations
  - 10.6 If unable to effectively ventilate the patient using the above maneuvers, immediately initiate transport

### Paramedic STOP

### Medical Control Options

### Key Points / Considerations