

Obstructed Airway (Adult)**CFR AND ALL PROVIDER LEVELS**

1. If the patient is conscious and can breathe, cough, speak, or cry:
 - a. Encourage coughing.
2. If the patient is unconscious or cannot breathe, cough, speak, or cry:
 - a. Perform airway maneuvers or CPR, as per current AHA guidelines.
3. If airway obstruction is relieved:
 - a. ABCs and vital signs.
 - b. Airway management, and appropriate oxygen therapy.

● CFR STOP**EMT**

4. Request ALS assistance.
5. Transport.
6. Continue obstructed airway maneuvers enroute to the hospital until the foreign body is dislodged.

● EMT STOP**Paramedic**

7. Perform direct laryngoscopy, attempt to remove the foreign body with Magill Forceps.
8. Perform Advanced Airway Management.
9. If able to confirm intubation via direct visualization, but unable to ventilate:
 - a. Note the Endotracheal Tube depth.
 - b. Deflate the Endotracheal Tube cuff if using a cuffed tube.
 - c. Advance the Endotracheal tube to its deepest depth.
 - d. Return the Endotracheal Tube to its original depth.
 - e. If using a cuffed tube, re-inflate the Endotracheal Tube cuff and attempt ventilation again.
 - f. If unable to effectively ventilate the patient using the above maneuvers, immediately initiate transport.

● Paramedic STOP

Obstructed Airway (Pediatric)

CFR AND ALL PROVIDER LEVELS

1. If the patient is conscious and can breathe, cough, speak, or cry:
 - a. Encourage coughing.
2. If the patient is unconscious or cannot breathe, cough, speak, or cry:
 - a. Perform airway maneuvers or CPR, as per current AHA guidelines.
3. If airway obstruction is relieved:
 - a. ABCs and vital signs.
 - b. Airway management, and appropriate oxygen therapy.

● CFR STOP

EMT

4. Request ALS assistance.
5. Transport.
6. Continue obstructed airway maneuvers enroute to the hospital until the foreign body is dislodged.

● EMT STOP

Paramedic

7. Perform direct laryngoscopy, attempt to remove the foreign body with Magill Forceps.
8. Perform Advanced Airway Management.
9. If able to confirm intubation via direct visualization, but unable to ventilate:
 - a. Note the Endotracheal Tube depth.
 - b. Deflate the Endotracheal Tube cuff if using a cuffed tube.
 - c. Advance the Endotracheal tube to its deepest depth.
 - d. Return the Endotracheal Tube to its original depth.
 - e. If using a cuffed tube, re-inflate the Endotracheal Tube cuff and attempt ventilation again.
 - f. If unable to effectively ventilate the patient using the above maneuvers, immediately initiate transport.

● Paramedic STOP