



**Airway Obstruction**

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Effective: 12/01/2021

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Next Review: 09/2024

**• Signs of severe airway obstruction:**

- Poor air exchange
- Cyanosis
- Increased breathing difficulty
- Inability to speak/breathe
- Silent cough

**BLS**

- Assess V/S, Including SpO<sub>2</sub>
- O<sub>2</sub> at appropriate rate if hypoxemic (SpO<sub>2</sub> <94%) or short of breath
- Suction as needed, be prepared to support ventilation with airway adjuncts

**Signs of severe airway obstruction?**

NO

**Foreign Body (FB)**

**Infection**

**Anaphylaxis**

- Perform abdominal thrusts
- Begin CPR if pt becomes unresponsive
- Check mouth & remove any visible FB, do not perform blind finger sweeps

- Position of comfort
- Consider humidified O<sub>2</sub>
- Assist ventilation with BVM if necessary
- Avoid airway visualization and use of an OPA

Go to Allergic Reaction/Anaphylaxis Protocol (M-1)

**LALS**

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- If inadequate ventilation:**
- Consider nebulized epinephrine 1:1,000 – 5 mg (5 mL) HHN, mask, or BVM
  - Consider advanced airway

- Cardiac monitor (**AEMT II**)
- Establish vascular access at appropriate time (may bolus up to 1000 mL NS)
- Monitor & reassess

**LALS**