

## PEDIATRIC AIRWAY OBSTRUCTION



### INFANT (LESS THAN 1 YEAR OF AGE):

1. Confirm severe airway obstruction. Check for the sudden onset of severe breathing difficulty, ineffective or silent cough, and/or a weak or silent cry.
2. Perform up to 5 back slaps and up to 5 chest thrusts.
3. Repeat step 2 until effective or victim becomes unresponsive.
4. If victim is unresponsive with no breathing or no normal breathing (i.e. agonal gasps), begin performing CPR (no pulse check).
5. Before you deliver breaths, look into mouth. If you see a foreign body that can be easily removed, remove it.
6. If unable to ventilate patient, attempt to remove obstruction with laryngoscope and McGill forceps.

### CHILD (1 YEAR TO ADOLESCENT (PUBERTY)):

1. Ask "Are you choking?"
2. Perform abdominal thrusts/Heimlich maneuver.
3. Repeat abdominal thrusts until effective or victim becomes unresponsive.
4. If victim is unresponsive with no breathing or no normal breathing (i.e. agonal gasps), begin performing CPR (no pulse check).
5. Before you deliver breaths, look into mouth. If you see a foreign body that can be easily removed, remove it.
6. If unable to ventilate patient, attempt to remove obstruction with laryngoscope and McGill forceps.
7. If obstruction persists, consider **needle cricothyrotomy (for patients > 2 years of age)**.