

Effective Date : September 1, 2018

Last Review: September 1, 2018 – New Policy

Next Review: September 2021

Authority: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9

Definitions:

1. Supraglottic Airway Device (SAD): A device that is placed into the oral pharynx and subsequently placed over the glottic opening. This is done in a blind fashion without the aid of a laryngoscope. This will aid in the oxygenation and ventilation of the patient.
2. Merced EMS approved device is the i-gel SAD.

Purpose: The purpose of this policy is to define training standards, criteria, and procedures for the use of a SAD. This is to be utilized when BVM ventilation is not adequate. In the pediatric patient this will be used instead of endotracheal intubation. Further, if an EMT completes an approved Optional Scope training program and submits the appropriate documentation they may use a SAD on **Adult (12 years or older)** patients only.

Policy: Paramedics or AEMT may utilize the approved SAD as a primary or secondary advanced airway device for patients weighing equal to or greater than 2 kgs. EMT – OS may utilize the approved SAD as a primary or secondary advanced airway for adult patients only

- a) Indications for use:
 - a. Cardiac arrest
 - b. Respiratory arrest with no immediate reversible cause (i.e. hypoglycemia or opioid overdose overdose).
 - c. Adult patients in need of an advanced airway and/or unable to be adequately ventilated with a BVM when orotracheal intubation is unavailable or unsuccessful.
 - d. Adult patients in need of rapid advanced airway control when orotracheal intubation is anticipated to be difficult.
 - e. For AEMT and paramedics only: Pediatric patients, equal to or less than 11 years in age or fits onto length based assessment tape, in need of airway protection or unable to be adequately ventilated by BVM.
 - f. For EMT-OS for Adult patients, 12 years of age or older, in need of airway protection or unable to be adequately ventilated by BVM.
- b) Contraindications:
 - a. Intact gag reflex
 - b. Severe airway trauma
 - c. Esophageal burns from caustics
 - d. Complete airway obstruction
 - e. Trismus
 - f. Oral trauma (relative)
 - g. Esophageal disease
- c) Complications:
 - a. Airway trauma
 - b. Regurgitation
 - c. Aspiration
 - d. Direct trauma to esophagus
- d) Equipment:
 - a. Appropriately sized SAD
 - b. Water based lubricant
 - c. Suction device
 - d. Securing device for SAD
 - e. Bag valve mask



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- f. Stethoscope
 - g. Pulse oximetry device
 - h. End Tidal CO₂ capnography wave form device preferred for Paramedic or AEMT, Colormetric for EMT-OS
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- e) Procedure
 - a. Don PPE
 - b. Assure patent airway
 - c. Apply monitor (ECG) and pulse oximetry
 - d. Pre-oxygenate with 100% oxygen
 - e. Apply chin lift and introduce the SAD into the mouth
 - f. Attach BVM and ventilate
 - g. Connect the ETCO₂ device and to remain in place until arrival at hospital
 - f) Education requirements
 - a. Complete an approved Merced EMS approved class using the approved training and skill competencies documents
 - g) Continuous quality Assurance.
 - a. 100 % audit of all SAD attempts and placements
 - h) Mandatory metrics
 - a. See data sheets