



Yolo County Emergency Medical Services Agency

Protocols

Revised Date: September 1, 2018

AIRWAY OBSTRUCTION	
Adult	Pediatric
BLS	
<ul style="list-style-type: none"> Abdominal thrusts in rapid sequence If ineffective, or patient is obese, or late stage pregnancy, consider chest thrusts If patient becomes unresponsive start CPR If able to visualize foreign body, attempt to remove it Assist ventilations with BVM 	<p style="text-align: center;"><u>Patient < 1 year old</u></p> <ul style="list-style-type: none"> 5 back blows followed by 5 chest compressions If patient becomes unresponsive start CPR <p style="text-align: center;"><u>Patient > 1 year old</u></p> <ul style="list-style-type: none"> Abdominal thrusts in a rapid sequence If patient becomes unresponsive start CPR If able to visualize foreign body attempt to remove it Assist ventilations with BVM
ALS	
<ul style="list-style-type: none"> If able to visualize the foreign body, use Magill forceps to attempt to remove the obstruction If airway cannot be managed, consider endotracheal intubation Do not use supraglottic airway device 	<ul style="list-style-type: none"> If able to visualize the foreign body use Magill forceps to attempt to remove the obstruction
Direction	
<ul style="list-style-type: none"> If obstruction is suspected epiglottitis, do not attempt to visualize the throat or insert anything into the mouth. Minimize outside stimuli, keep patient calm, and allow position of comfort. Early Receiving Hospital ED Physician contact. 	