



NASOPHARYNGEAL AIRWAY



Escambia County, Florida - ALS/BLS Medical Protocol

Nasogastric Tube insertion is indicated to relieve gastric distention in the ventilated
OROPHARYNGEAL AIRWAY

The oropharyngeal airway (oral airway) is a disposable semi-circular device used to hold the tongue away from the posterior wall of the pharynx. This airway should only be used in patients without a gag reflex.

Procedure


- 1 Safe scene, standard precautions.
- 2 Measure oropharyngeal airway for proper size (from angle of the mandible to just beyond the lips).
- 3 Clear mouth and pharynx of any foreign objects, blood, vomit or secretions.
- 4 Insert a tongue blade to displace the tongue inferiorly and anteriorly and insert the airway posteriorly toward the back of the oropharynx following the normal curvature of the oral cavity. If a tongue blade is unavailable, the airway may be inserted from the side to the back of the tongue. Caution should be used not to catch the tongue, as it will push the tongue back into the hypopharynx occluding the patient's airway.
- 5 Select proper ventilator device and proper mask (Auto Vent or BMV).
- 6 Ensure seal around patient's airway and ventilate.
- 7 Auscultate lung fields for adequate breath sounds.



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The nasopharyngeal airway is a flanged disposable airway that is soft and pliable. It is used to maintain compromised airways on conscious and semi-conscious patients with a gag reflex. In most of the population (approximately 90%), the airway is inserted into the right nares. In patients with deviated septums, the airway will need to be inverted so the bevel is toward the septum and then inverted again when the airway reaches the posterior wall. The airway should be measured from the tip of the patient's nose to the tragus of the ear. Lubrication may be needed. The airway should not be forced. The airway is contraindicated with severe head trauma, basal skull fracture and nasal or maxillofacial fractures.

Procedure


- 1 Safe scene, standard precautions.
- 2 Measure nasal pharyngeal airway for proper size.
- 3 Clear airway of any foreign objects, blood, vomit or secretions.
- 4 Insert airway.
- 5 Administer appropriate ventilatory support or oxygen therapy.



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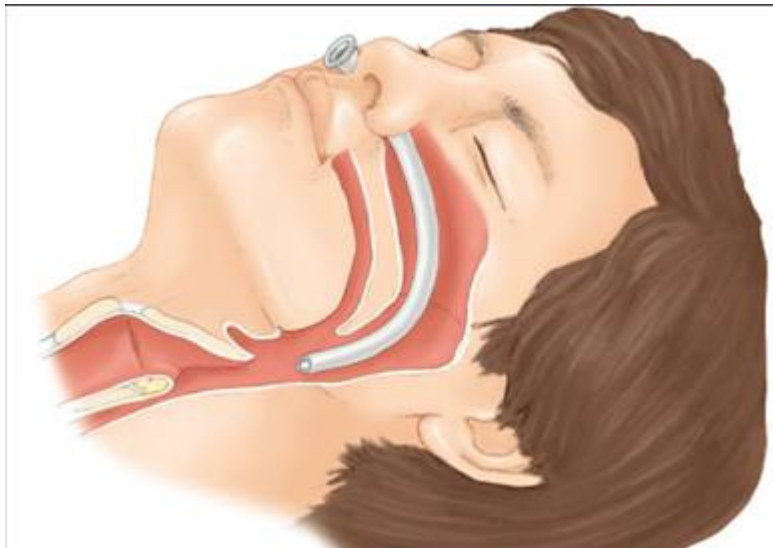

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