# **Emergency Medical Responder: A Skills Approach**

Fifth Canadian Edition



#### Chapter 7

The Airway and Ventilation



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#### Objectives (1 of 2)

- Label the major structures of the respiratory system
- Describe and demonstrate the head-tilt/chin-lift and jaw-thrust maneuvers
- Explain oropharyngeal and nasopharyngeal airway adjuncts
- State the importance of having a suction unit ready for immediate use
- · List the seven signs of inadequate breathing
- Describe and demonstrate how to ventilate a patient



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#### Objectives (2 of 2)

- Describe the use of oxygen cylinders and delivery equipment
- Describe the special considerations for administering oxygen to patients with chronic obstructive pulmonary disease (COPD)
- Explain how to clear a foreign body airway obstruction (FBAO)
- Discuss how a mechanism of injury might affect the method used to open an airway
- Explain why basic life support ventilation and airway protective skills are second in priority only to pulse checks and cardiac compression



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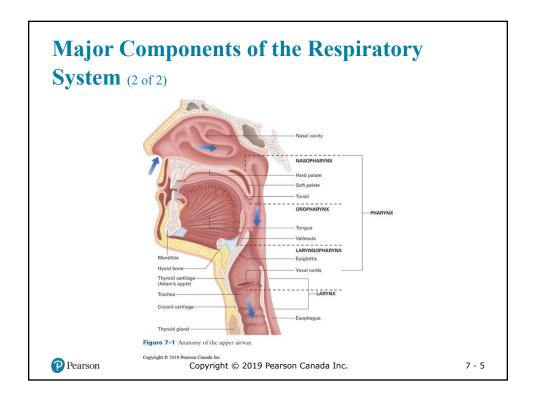
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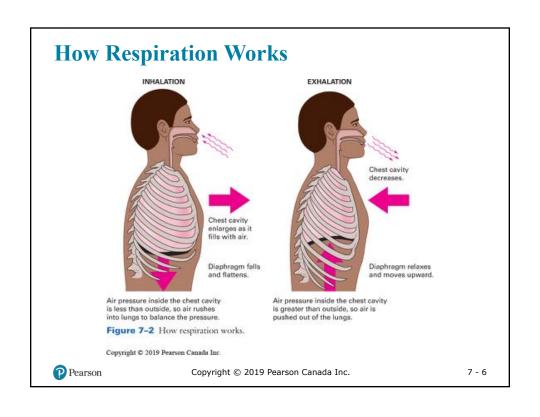
# **Major Components of the Respiratory System** (1 of 2)

- Nose
- Mouth
- Pharynx (throat)
- Epiglottis
- Trachea (windpipe)
- Bronchi
- Lungs
- Diaphragm

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# **Table 7–1 Normal Breathing Rates**

Patient	Breathing Rate
Infant	Up to 60 breaths per minute
Child	20–40 breaths per minute
Adult	12–20 breaths per minute

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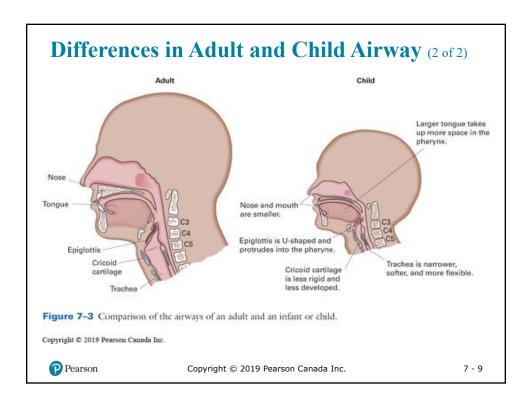
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# Differences in Adult and Child Airway (1 of 2)

- Nose and mouth
- Tongue
- Epiglottis
- Cricoid cartilage
- Trachea

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# **Sounds Indicating Obstruction**

- Snoring
- Crowing
- Gurgling
- Stridor

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# **Clearing the Airway**

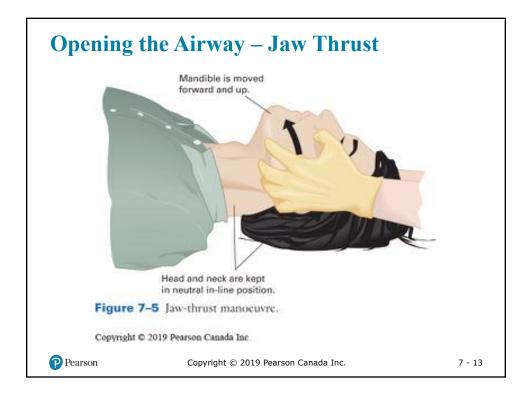
- Recovery position
- Finger sweeps
- Suctioning



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# **Two Types of Airways**

- Oropharyngeal Airway
- Nasopharyngeal Airway

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### Using an Airway Adjunct

- It must be clean and free of obstructions
- It must be of the proper size
- · Patients with airway adjuncts can still aspirate
- Patient's mental status and gag reflex will indicate appropriateness of adjunct
- Continually and carefully monitor the patient's mental status



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#### Using an Airway Adjunct - OPA



Figure 7-7a Measure the oropharyngeal airway

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reaches its proper position.

Figure 7-7b Insert it with the tip pointing

toward the roof of the mouth.

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Figure 7-7d Continue inserting until the flangerests on the patient's teeth.

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# Using an Airway Adjunct - NPA (1 of 2)



Figure 7-10a Measure the nasopharyngeal airway to ensure the correct size.

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Figure 7-10b Lubricate it with a water-soluble lubricant.

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# Using an Airway Adjunct - NPA (2 of 2)



Figure 7-10c Insert the airway adjunct.

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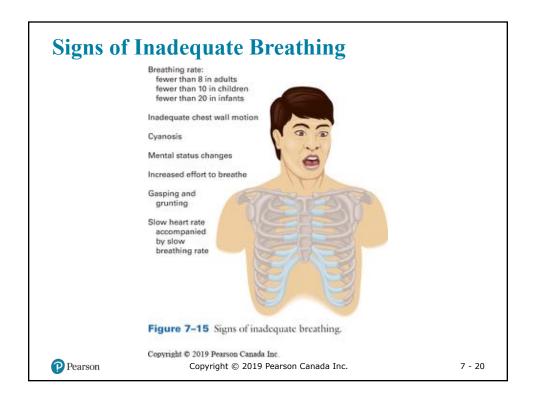
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# **Assessing Breathing in an Unresponsive Patient**

- Look for chest rise and fall
- Listen for air sounds
- Feel for air from the patient's nose and mouth

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#### **Artificial Ventilation**

- Mouth-to-Mask
- Mouth-to-Barrier Device
- Mouth-to-Mouth
- Mouth-to-Stoma
- Bag-Valve-Mask



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### **Indications of Adequate Ventilation**

- · Adequate respiration rate
- · Consistent and sufficient air force
- Decrease in patient's heart rate or return to normal
- Patient's colour improves



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#### **Table 7–2 Artificial Ventilation Rates**

Patient	Ventilation Rate
Newborn	40–60 breaths per minute at 1 second each
Infant/child	12–20 breaths per minute at 1 second each (approximately 1 breath every 3–5 seconds)
Adult	10–12 breaths per minute at 1 second each (approximately 1 breath every 5–6 seconds)

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# **Conditions That May Require Oxygen Therapy**

- Major injury
- Heart or breathing problems
- Shock
- Any condition that prevents efficient oxygen flow throughout body

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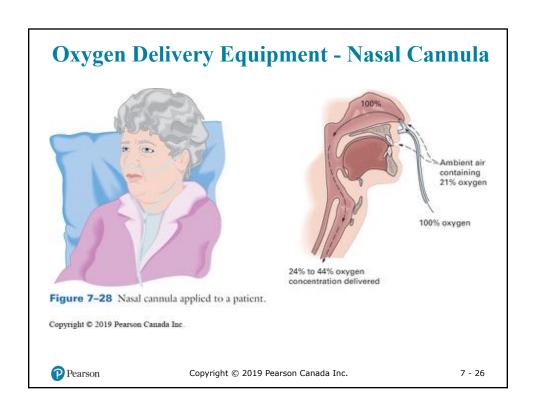
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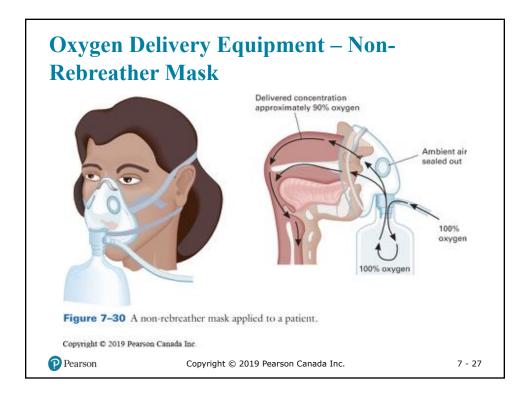
# **Signs and Symptoms That Indicate Oxygen Therapy Needed**

- Poor skin colour
- Unresponsiveness
- · Cool, clammy skin
- · Difficulty breathing
- Blood loss
- Chest Pain
- Trauma

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### Foreign Body Airway Obstruction (FBAO)

- Partial
- Complete

#### **Special Considerations**

- Pregnant patient
- Obese patient
- Infant or child up to 1 year

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