

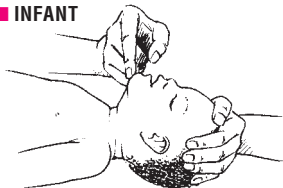
Chart 4. How to manage the airway in a child with obstructed breathing (or who has just stopped breathing)

A: When no neck trauma is suspected

Child conscious

1. Inspect mouth and remove foreign body, if present.
2. Clear secretions from the throat.
3. Let child assume position of maximal comfort.

■ INFANT



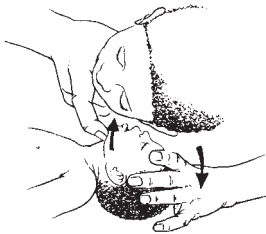
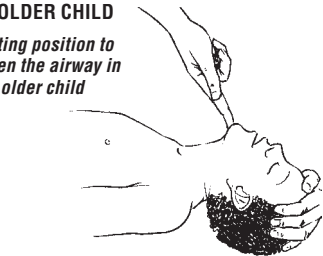
Neutral position to open the airway in an infant

Child unconscious

1. Tilt the head as shown, keep it tilted and lift chin to open airway.
2. Inspect mouth and remove foreign body if present and easily visible.
3. Clear secretions from the throat.
4. Check the airway by looking for chest movements, listening for breath sounds and feeling for breath (see diagram).

■ OLDER CHILD

Tilting position to open the airway in an older child



Look, listen and feel for breathing

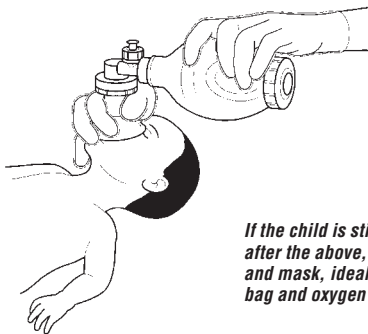
Chart 4. How to manage the airway in a child with obstructed breathing (or who has just stopped breathing)

B: When neck trauma or cervical spine injury is suspected: jaw thrust

1. Stabilize the neck as shown in Chart 6, and open the airway.
2. Inspect mouth and remove foreign body, if present.
3. Clear secretions from throat under direct vision.
4. Check the airway by looking for chest movements, listening for breath sounds and feeling for breath.



Use jaw thrust if airway are still not open. Place the fourth and fifth fingers behind the angle of the jaw and move it upwards so that the bottom of the jaw is thrust forwards, at 90° to the body



If the child is still not breathing after the above, ventilate with bag and mask, ideally with a reservoir bag and oxygen