

Pediatric Airway Obstruction/Choking

For any upper airway emergency including choking, foreign body, swelling, stridor, croup, and obstructed tracheostomy

History

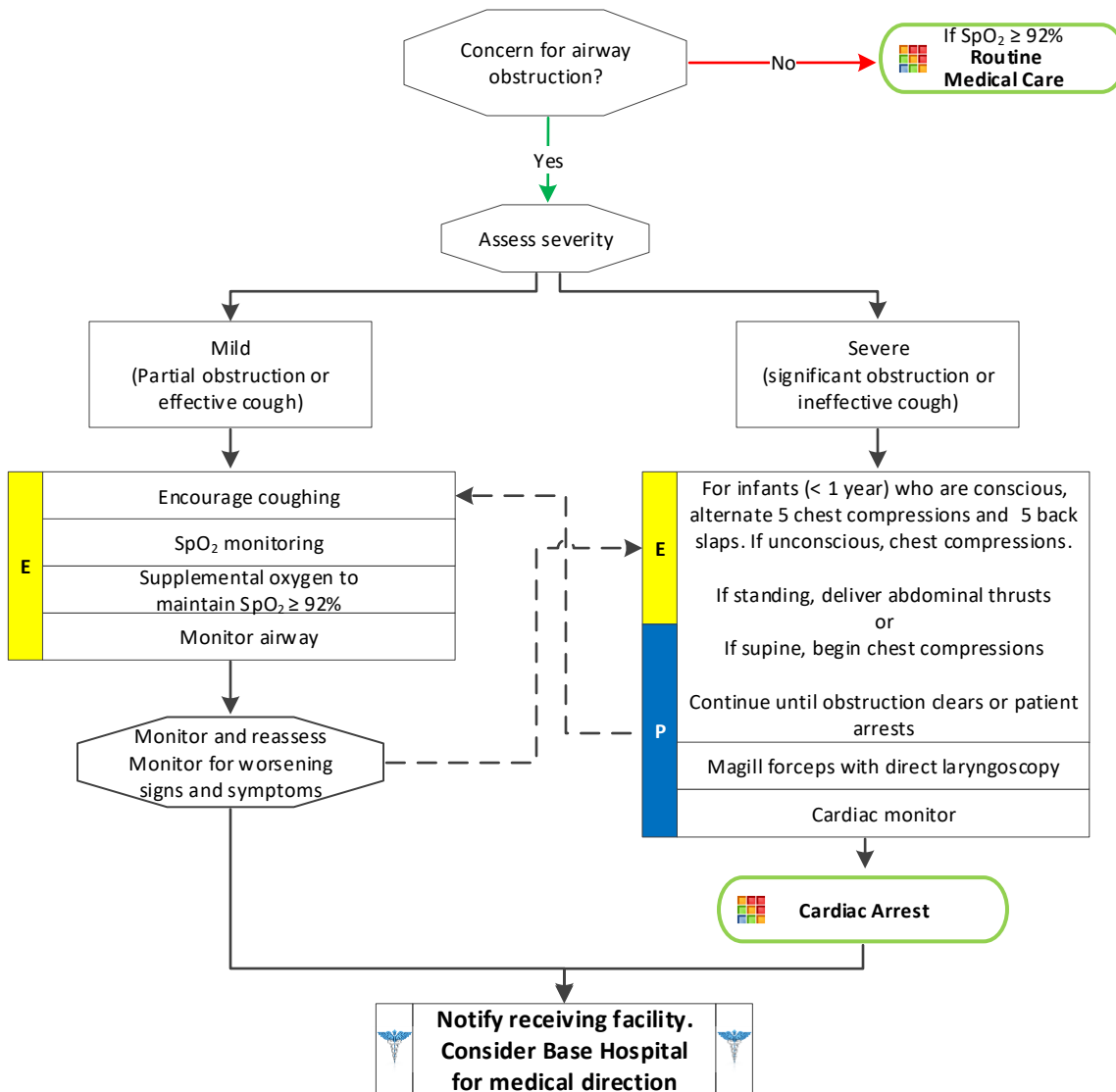
- Sudden onset of shortness of breath/coughing
- Recent history of eating or food present
- History of stroke or swallowing problems
- Past medical history
- Sudden loss of speech
- Syncope

Signs and Symptoms

- Sudden onset of coughing, wheezing or gagging
- Stridor
- Inability to talk
- Universal sign for choking
- Panic
- Pointing to throat
- Syncope
- Cyanosis

Differential

- Foreign body aspiration
- Food bolus aspiration
- Epiglottitis
- Syncope
- Hypoxia
- Asthma/COPD
- CHF exacerbation
- Anaphylaxis
- Massive pulmonary embolus



Pediatric Respiratory Distress Treatment Protocols

Pearls

- Bag valve mask can force the food obstruction deeper.
- If unable to ventilate, consider a foreign body obstruction, particularly after performing proper airway maneuvers.
- Advanced airways are only approved for patients that do not measure on the Broselow Tape. A height of > 4ft is required for the King Airway.

