

AIRWAY

Airway Does Not Necessarily Equal Intubation

The ABCs

1) Suction

2) Move the Tongue

Head Tilt, Jaw Thrust, Chin Lift

NP and OP Airway Adjuncts

3) Add FiO2

Non Rebreather Mask (Breathing)

Bag Valve Mask (Not Breathing)

4) Add PEEP

Ask for BiPAP (Breathing)

Ask for Intubation Equipment (Not Breathing)

5) Fill the Tank

Fluid Bolus

6) Find Clogged Pipes

Tension Pneumothorax

Pulmonary Embolism

Cardiac Tamponade

7) Squeeze Broken Pipes

Vasopressors

8) Check the Pump

EKG

****DISCLAIMER! If your patient starts to crash, the correct first step is to get your attending****

Airway does not equal intubation?!

-You don't have *minutes*. You have 60 SECONDS

-Intubation can kill critical patients (<http://emcrit.org/podcasts/intubation-patient-shock/>)

Approach to Airway

1) Suction

IMMEDIATELY suction when the patient is Vomiting, Gurgling, Choking, etc.

2) Move the POSTERIOR Portion of the Tongue

Head Tilt

Chin Lift

Jaw Thrust

Oropharyngeal Airways

Nasopharyngeal Airways

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**\*\*I know what you are thinking.. YES! Pre-Intubation airway management is only TWO STEPS. Keep it simple, and move on to the Bs and the Cs\*\***