

AIRWAY MANAGEMENT

1. AIRWAY CHECKLIST

- 1.1 **Airway Checklist Purpose:** To accurately assess and provide for airway patency from initial patient contact to turnover of care
- 1.2 **Airway Definition:** The airway extends from the nose and mouth to the alveolar ducts where oxygen and carbon dioxide are exchanged. If the exchange of these gases is impeded at any stage, the patient's airway is compromised
- 1.3 **Airway Checklist Indications:** Indicated for patients with or at risk for airway compromise. This includes:
 - ▶ Cardiac/Respiratory Arrest
 - ▶ Shortness of breath with visible distress
 - ▶ Significant tachypnea/bradypnea <10 >30 (adults)
 - ▶ Patients who cannot protect their own airway
 - ▶ ALTE
 - ▶ Respiratory depression after receiving sedation or pain management
 - ▶ Patients treated with an airway adjunct, BVM, suctioning or CPAP for airway compromise
- 1.4 For all patients whom the airway checklist is indicated, use the checklist concurrently with patient care. Thoroughly document all airway checklist components (initial assessments, reassessments and interventions) in the appropriate fields in the PCR

Assessment	Initial	Reassess
Respiratory History Obtained		
Vital Signs (Full Set)		
SAO ₂		
ETCO ₂		
Lung Sounds		
Skin Signs		
Interventions	Yes	No
If Indicated Did Pt. Receive Oxygen		
Position Patient Airway		
Open & Clear Airway		
Outcome	Yes	No
If Hypoxic Improved Oxygenation		
Prevent Aspiration		
Offer Ambulance Transport		
Patient Improved		