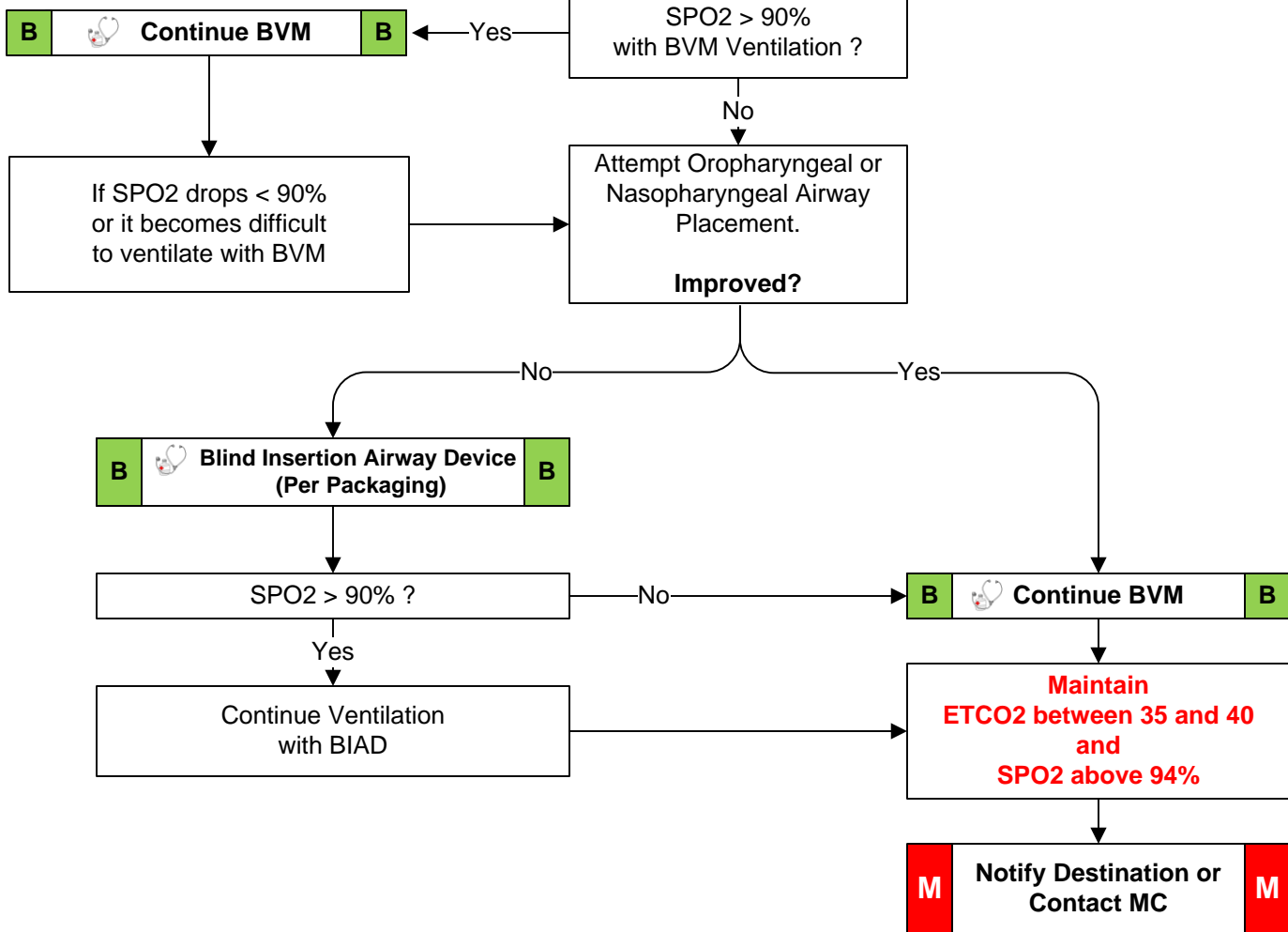




# Airway, Pediatric-Failed



Legend		
	MR	
B	EMT	B
I	EMT- I	I
P	EMT- P	P
M	Medical Control	M



General Protocols

## Pearls

- If first intubation attempt fails, make an adjustment and then try again:
  - Different laryngoscope blade
  - Gum Elastic Bougie
  - Different ETT size
  - Change cricoid pressure
  - Apply BURP maneuver (Push trachea Back [posterior], Up, and to patient's Right)
  - Change head positioning
- Ventilatory rate should be 30 for Neonates, 25 for Toddlers, 20 for School Age, and for Adolescents the normal Adult rate of 12 per minute. Maintain a EtCO2 between 30 and 35 and avoid hyperventilation.**
- Continuous pulse oximetry should be utilized in all patients with an inadequate respiratory function.
- Continuous EtCO2 should be applied to all patients with respiratory failure or to all patients with advanced airways.
- Notify **Medical Control AS EARLY AS POSSIBLE** about the patient's difficult / failed airway.