**PRACTICAL SKILL**

**REMOVAL OF AIRWAY OBSTRUCTION**

**Purpose:**
To remove a foreign body from the upper airway

**Indications:**
Patient with an airway obstruction

**Advantages:**
- Rapid removal of visible obstruction
- Avoids potential trauma of abdominal thrusts

**Disadvantages:**
- Requires specialized equipment and training
- Obstruction must be visible

**Complications:**
- Oral or airway trauma

**Contraindications:**
- Foreign body below the level of the vocal cords

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Assemble laryngoscope and blade, checking the battery and light source

Place patient's head in a slightly extended position, maintaining in-line stabilization for patients with suspected C-spine injury

Holding the laryngoscope in the left hand, insert the blade into the right side of the mouth and sweep the tongue to the left

Lift up and anterior with blade to expose the pharynx and epiglottis

Suction as necessary

Visualize the foreign body

Holding Magill forceps in the right hand, insert the tip into the patient's mouth, grasp and remove the obstruction

Visualize airway for further obstructions before removing laryngoscope blade

Ventilate patient for 5-6 breaths with supplemental oxygen

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**NOTES:**
- To prevent damaging the patient's teeth, avoid any leverage on the laryngoscope blade or teeth.