Follow Initial Protocol for All Patients

**Inability to intubate patient or foreign body obstruction?**

- **Unable to intubate**
  - **G6. Bag Valve Mask**
    - Focus on:
      - Repositioning
      - Placement
      - 2 Person BVM Method
    - Maintaining oxygenation/ventilation
  - Consider use of **G6. PEEP Valve**
  - Maintaining oxygenation and ventilation?
    - **Yes**
      - Continue **G6. Bag Valve Mask** Ventilations
    - **No**
  - **G7. BIAD Placement**
    - Successful?
      - **Yes**
        - Maintaining oxygenation/ventilation
      - **No**
    - and/or
    - **G26. Gastric Tube Placement**
    - **Yes**
      - Go to the nearest hospital if:
        - Unable to ventilate/oxygenate patient
        - Needle Cricothyrotomy has been performed
    - **No**

**Special Considerations**

- Call for assistance early, such as supervisory staff.
- Focus on basic level skills
- Consider placement of G26. Gastric Tube Placement through King LT, especially if there is a long period of bag valve mask ventilation
- Utilize EtCO2 monitoring between Bag Valve and Mask.

**Follow Initial Protocol for All Patients**

** Goals:**
- Improve ventilation
- Improve oxygenation

** Signs/Symptoms:**
- Patients who are not able to be intubated with an ETT
- Patients with abnormal anatomy

** Documentation Key Points:**
- Treatment provided
- Why airway was missed previously

**BLS**

**ALS**

**Interfacility**

**G6. Bag Valve Mask**

- Focus on:
  - Repositioning
  - Placement
  - 2 Person BVM Method

- Maintaining oxygenation/ventilation

- **No**

- **Yes**

**G37. Needle Cricothyrotomy**

- Continue **G6. Bag Valve Mask** Ventilations

- Notify receiving hospital as soon as possible