



Oxygen and Airway Adjuncts

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2013



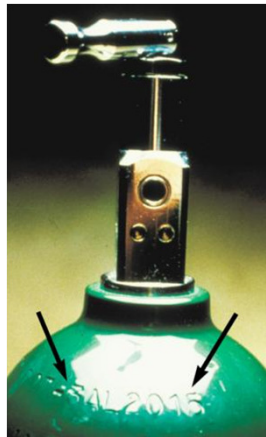
Oxygen (“O₂”)

- Supplied as **medical** oxygen
 - **Not the same as commercial oxygen**
- Supports combustion, but is not flammable
- **When full, a tank contains 2000 psi**
- Exercise **care** when handling and storing oxygen tanks

Oxygen (“O₂”)

- Oxygen **regulators** convert pressure to a working pressure of **50 psi**
 - Further regulated by flowmeter
- **Pin Index Safety System**
 - “PISS”
- **“Safe residual pressure” is 200 psi**

PISS for Oxygen



Yoke Regulator



"On Board" Regulator



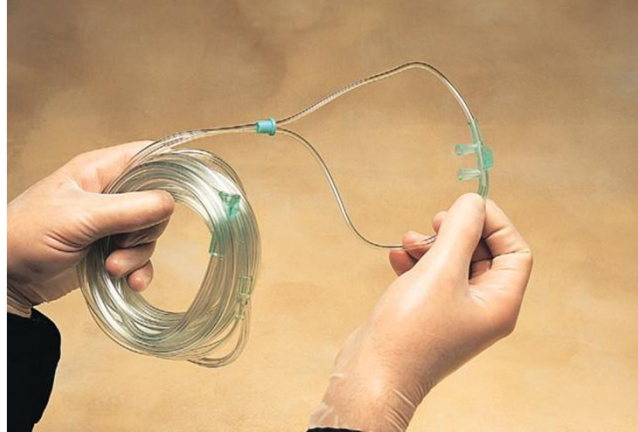
Oxygen Delivery Devices

- Nasal Cannula
 - Low flow, low percentage
 - 20 – 44% oxygen
- NonRebreather Mask
 - High flow, high percentage
 - **Up to** approximately 80 - 90% oxygen
- Bag Valve Mask ("BVM")
 - High flow, high percentage
 - Close to 100% oxygen
 - **Used to ventilate patients with inadequate respirations**

NonRebreather Mask



Nasal Cannula



Partial Rebreathing Masks

- Similar to nonrebreathing mask
 - Except no one-way valve between mask and reservoir
 - Consequently, patients rebreathe a small amount of exhaled air.
 - Advantageous if patient is hyperventilating
 - Not in NY State Protocol

Venturi Masks

- A number of settings can vary the percentage of oxygen while a constant flow is maintained.
- Medium-flow device that delivers 24% to 40% oxygen
- Useful in long-term management of physiologically stable patients

Venturi Mask



Tracheostomy Masks (1 of 2)



- Patients with tracheostomies do not breathe through their mouth and nose.

Tracheostomy Masks (2 of 2)

- Tracheostomy masks cover the tracheostomy hole and have a strap that goes around the neck.
 - May not be available in an emergency setting
 - Improvise by using a face mask instead, placed at the tracheostomy opening.

 BVM



 BVM – one rescuer



BVM – two rescuer



Some important facts

- Inhaled air contains
 - 21% oxygen
 - 79% other gasses
- Exhaled air contains
 - 16% oxygen
 - 4% carbon dioxide



Why do we breath?

- **The average healthy human breaths due to "CO₂ drive"**
 - **Increased CO₂ levels in arterial blood detected in the brain stimulate inhalation**
 - **"COPD" patients may breath due to a "hypoxic drive"**
 - **Decreased arterial O₂ levels detected in the brain stimulate inhalation**



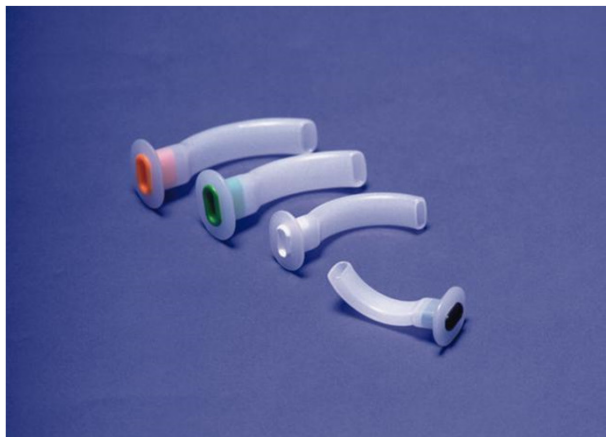
Airway Adjuncts

- Mechanical devices that *assist* in keeping the airway patent (open & clear)
 - **Does not substitute for routine airway control (e.g. head tilt/chin lift)**
- Oropharyngeal Airway – "OPA"
- Nasopharyngeal Airway – "NPA"
- Suction

Oropharyngeal Airway – “OPA”

- Used in patients with no gag reflex who are unresponsive
- **Must be sized correctly!**
 - Measured from the corner of the patients mouth to the tip of the earlobe – or
 - From the center of the patients mouth to the angle of the lower jawbone

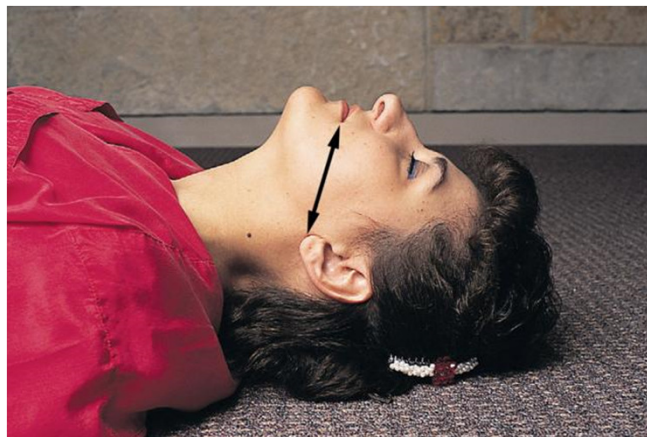
One type of OPA



Inserting the OPA



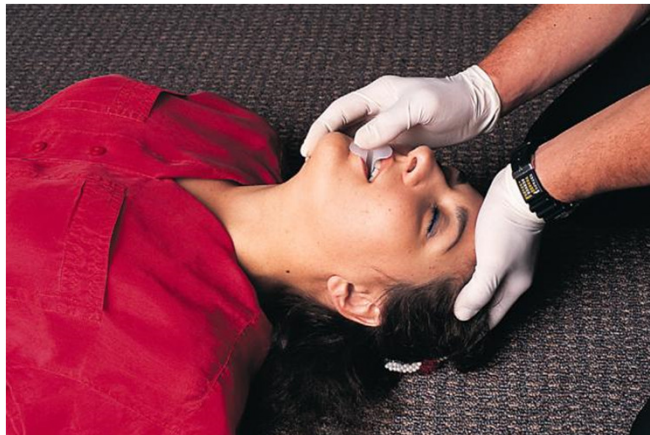
Inserting the OPA



Inserting the OPA



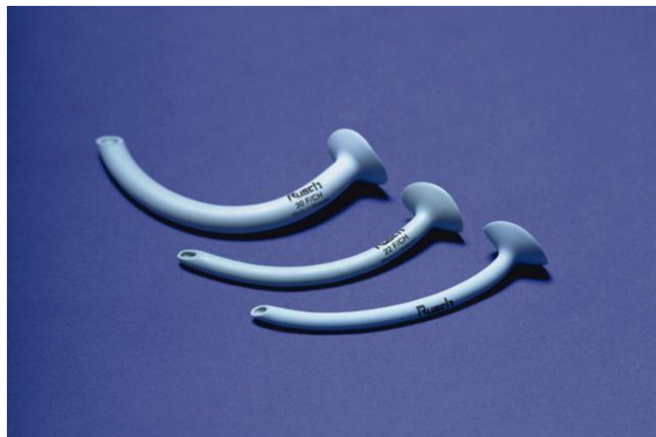
Inserting the OPA



Nasopharyngeal Airway – “NPA”

- Can be used in conscious patients and is generally well tolerated
- Measured from the patients nostril to the earlobe **or** angle of the lower jawbone

NPA



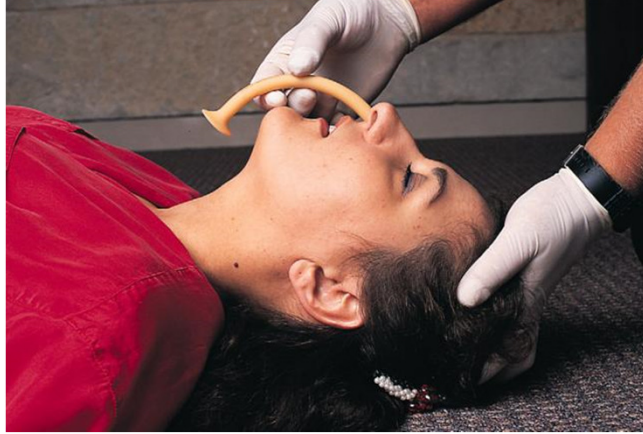
Inserting the NPA



Inserting the NPA



Inserting the NPA



Inserting the NPA



Suction

- Mechanical means of removing debris from the mouth or nose or throat area
- Two types
 - Fixed – on the ambulance
 - Portable
- **Suction for no more than 15 seconds**
 - **As long as you comfortably hold your breath**
- Suction Catheters
 - Rigid (“Yankauer”, “Tonsil Tip”)
 - Soft (“Whistle Tip”)

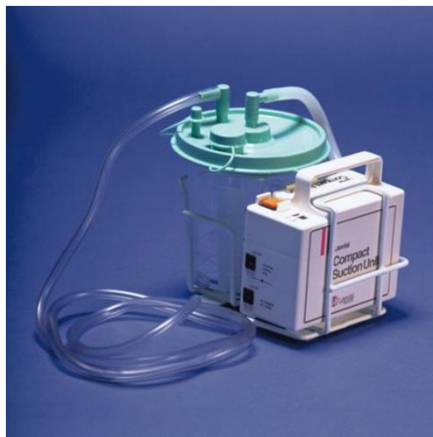
Fixed Suction



Portable Suction



Portable Electronic Suction



Yankauer Catheter



Whistle Tip Suction

