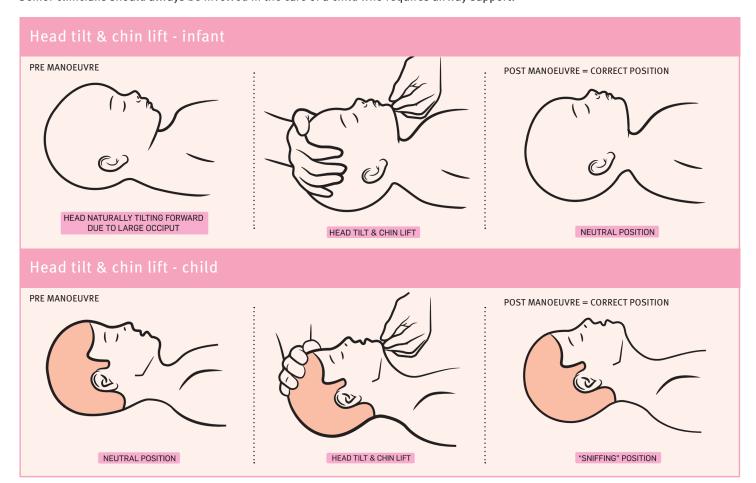
Queensland Paediatric Emergency Care

Skill Sheets

Airway Manoeuvres: Head Tilt & Chin Lift

The head-tilt, chin-lift technique is used to maintain and open airway in the unconcious infant or child. This manoeuvre is contraindicated if there is concern of cervical spine injury. To protect the cervical spine, the jaw thrust manoeuvre is recommended. Senior clinicians should always be involved in the care of a child who requires airway support.



Step 1:

Place a hand on the infant or child's forehead, gently tilt the head back. The correct position is neutral in infants and sniffing in children. See images demonstrating above.

Step 2:

Preform a chin lift by placing fingers under the chin, lifting gently upwards. Be careful not to apply pressure to the soft tissue below the mandible. This will obstruct the airway.

Tips

A towel or bunny rug can be utilised for infants and toddlers, as a shoulder roll to counteract the flexion caused by their relatively larger head.



ALERT

Infants and children have narrower airways that are more easily obstructed by external compression. Ensure no external pressure is accidently placed on the airway by hands or equipment.

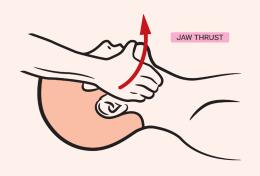




Airway Manoeuvres: Jaw Thrust

The simplest way of ensuring an open airway in an unconscious infant or child, is to use a head tilt chin lift technique. This manoeuvre is contraindicated if there is concern of possible spinal injury. In these cases, a jaw thrust manoeuvre is recommended.

Jaw Thrust



Step 1:

Place hands on either side of the infant or child's head.

Step 2:

Place 2-3 fingers at the angle of the jaw on both sides.

Step 3:

Then use fingers to gently lift upward and outward, without altering the position of the head.

Tips

When conducting a paediatric jaw thrust, placing the heels of your hands on the sides of the forehead can be helpful in stabilising the position of the head.



ALERT

Infants and children have narrower airways that are more easily obstructed by external compression. Ensure no external pressure is accidently placed on the airway by hands or equipment.

Promptly seek assistance from a senior clinician where paediatric airway management is required.

For further information:

<u>Nursing Standard: Clinical Assessment of the Paediatric Patient – Rapid Assessment / Primary and Secondary Survey / Vital Signs</u>

References:

Hazinski, M.F. (2013). Nursing Care of the Critically Ill Child. 3rd Ed. St Louis: Elsevier Mosby Group.

Kliegman, R., Stanton, B., Geme, J., Schor, N. & Behrman, R.. (2016) Nelsons Textbook of Pediatrics. 20th Ed. Philadelphia: Saunders Elsevier.

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- Providing care within the context of locally available resources, expertise, and scope of practice.
- Supporting consumer rights and informed decision making in partnership with healthcare practitioners including the right to decline intervention or ongoing management.

- Advising consumers of their choices in an environment that is culturally appropriate and which enables comfortable and confidential discussion.
 This includes the use of interpreter services where necessary.
- Ensuring informed consent is obtained prior to delivering care.
- Meeting all legislative requirements and professional standards.
- Applying standard precautions, and additional precautions as necessary, when delivering care.
- Documenting all care in accordance with mandatory and local requirements.

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