

KING AIRWAY PROCEDURE

ALWAYS USE STANDARD PRECAUTIONS

INDICATION

- When ventilation cannot be adequately maintained by BVM or other BLS techniques and intubation is anticipated to be difficult or intubation is unsuccessful after no more than one attempt (cardiac arrest patients) or two attempts (respiratory arrest patients)

CONTRAINDICATION

- Responsive patient with an intact gag reflex
- Patient with known esophageal disease
- Patients who have ingested caustic substances
- Tracheal stoma
- Patient < 4 feet tall or < 12 years of age

EQUIPMENT

- King Airway
- Syringe
- Water soluble lubricant
- Portable suction device
- Capnometry/capnography or Colormetric Device
- Stethoscope

Size	Patient Criteria	Color	Inflation Volume
3	4 – 5 ft.	Yellow	45 - 60 ml.
4	5 – 6 ft.	Red	60 - 80 ml.
5	> 6 ft.	Purple	70 - 90 ml.

PROCEDURE

- Open airway and pre-oxygenate with BVM for 1-3 min. with 100% O₂. Avoid hyperventilation in cardiac arrest.
- Test cuff according to manufacturer's instructions
- Apply water soluble lubricant to the distal end of the tube.
- Position the head into the "sniffing" position or neutral position if trauma is suspected
- Remove dentures before placing tube to prevent laceration of the cuffs
- Without exerting excessive force, advance tube until base of connector is aligned with teeth or gums
- Inflate cuffs based on size of tube
- Attach bag-valve to King Airway
- While gently bagging the patient to assess ventilation, withdraw the airway until ventilation is easy and free flowing
- Verify placement using all of the following:
 - Rise and fall of chest
 - Bilateral breath sounds
 - Absence of epigastric sounds
 - Capnometry/capnography or Colormetric Device
- Secure the tube with tape or commercial tube holder, noting depth marking on tube

SPECIAL CONSIDERATION

- If there is any doubt about the proper placement of the King Airway, deflate the cuffs and remove device; ventilate the patient with BVM for 30 seconds and repeat sequence of steps
- If unsuccessful on second attempt, resume BLS airway management