## **CPER** digest

## May 2017

In honour of Paramedic Services Week (May 28<sup>th</sup>-June 3<sup>rd</sup>), we would like to congratulate this year's Quality of Care Award Winners!



Michelle Faria – ACP with the County of Brant Ambulance Service Dillon Varey – PCP with Dufferin County Paramedic Service Malcolm Fan – ACP with Guelph-Wellington Emergency Medical Service Koty Gorman – PCP with Haldimand County Emergency Medical Service Vanessa Koprich – ACP with Hamilton Paramedic Service Joe Cox – PCP with Hamilton Paramedic Service Jody Solski – PCP with Hamilton Paramedic Service Simon Drakeford – ACP with Niagara Emergency Medical Service Graeme Mitchell – ACP with Niagara Emergency Medical Service Kerry Zerbes – PCP with Norfolk County Emergency Medical Service Steve Weinstein – PCP with Norfolk County Emergency Medical Service Linda Malcolm – ACP with the Region of Waterloo Paramedic Service Terry White – ACP with Six Nations Paramedic Service



You are called to a restaurant for a 46 year old female patient who was choking on some food and is now unresponsive. Upon your arrival, bystanders have initiated CPR. You delegate compressions to the fire department as your partner attaches the pads. You attempt to ventilate unsuccessfully. You reposition to attempt to open the airway. With the pads connected, you and your partner interpret the rhythm to be a PEA and continue with resuscitative efforts. You are still unable to ventilate and do not see anything visible in the airway.

After you complete the rhythm analysis and you have been unable to remove the obstruction with either BLS manoeuvres and/or laryngoscope and Magill forceps, what is your next step? If you said extricate and initiate transport, you are correct! As per the Foreign Body Airway Obstruction (FBAO) Medical Directive, early transport is indicated if you are unable to remove the FBAO within the first few minutes of assessment and intervention.

Upon reassessment in the vehicle, you visualize a piece of meat in the back of the patient's throat and remove it. Ventilations produce good chest rise and increased compliance. What is your next step now that you have relieved the airway obstruction? If you said, initiate the Medical Cardiac Arrest Medical Directive, you are correct!

As a PCP, you will complete the algorithm to include 4 rhythm analyses prior to transport unless a ROSC is achieved. As an ACP, you will complete the algorithm to include 3 Epi (and/or lidocaine if indicated) prior to making contact with the BHP to obtain transport orders unless a ROSC is achieved.

