

WHO charts for everyone caring for children in hospital

On pages 88 and 89 we reproduce **Chart 4. How to manage the airway in a child with obstructed breathing** from **'Pocket Book of Hospital Care for Children - Guidelines for the Management of Common Illnesses with Limited Resources**' WHO 2005 – see the whole book at http://www.ichrc.org/. We published Charts 1, 2 and 3 in previous issues of this journal (vol 3 nos 1, 2 and 3) and plan to publish more in future issues.

You can use these charts in different ways. For example, you can print them and display them in relevant wards or clinics (laminated if possible), or use them as a 'memory aid' in your pocket, as handouts or as training aids.

We thank the WHO for permission to reproduce these charts, and Dr O'Hare who gave us the idea of making the charts more widely available.

CHART 4. How to manage the airway in a child with obstructed breathing (or who has just stopped breathing) where no neck trauma is suspected

Child conscious

1. Inspect mouth and remove foreign body, if present
2. Clear secretions from throat
3. Let child assume position of maximal comfort

Child unconscious

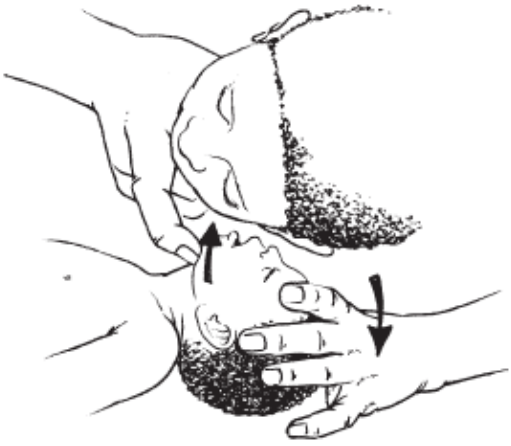
1. Tilt the head as shown
2. Inspect mouth and remove foreign body, if present
3. Clear secretions from throat
4. Check the airway by looking for chest movements, listening for breath sounds and feeling for breath

■ INFANT

Neutral position to open the airway in an infant

■ OLDER CHILD

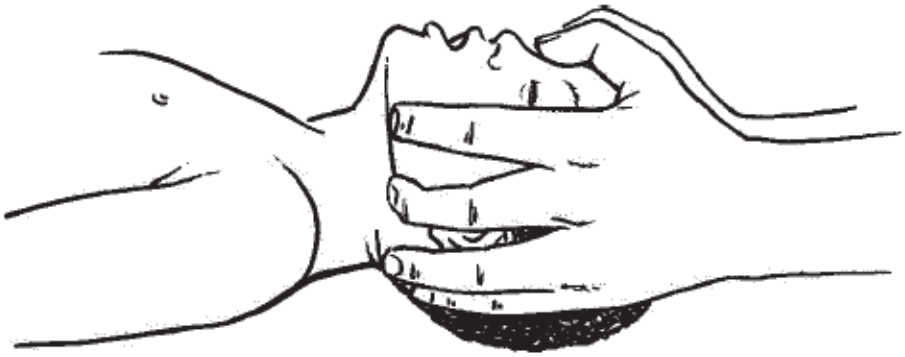
Sniffing position to open the airway in an older child



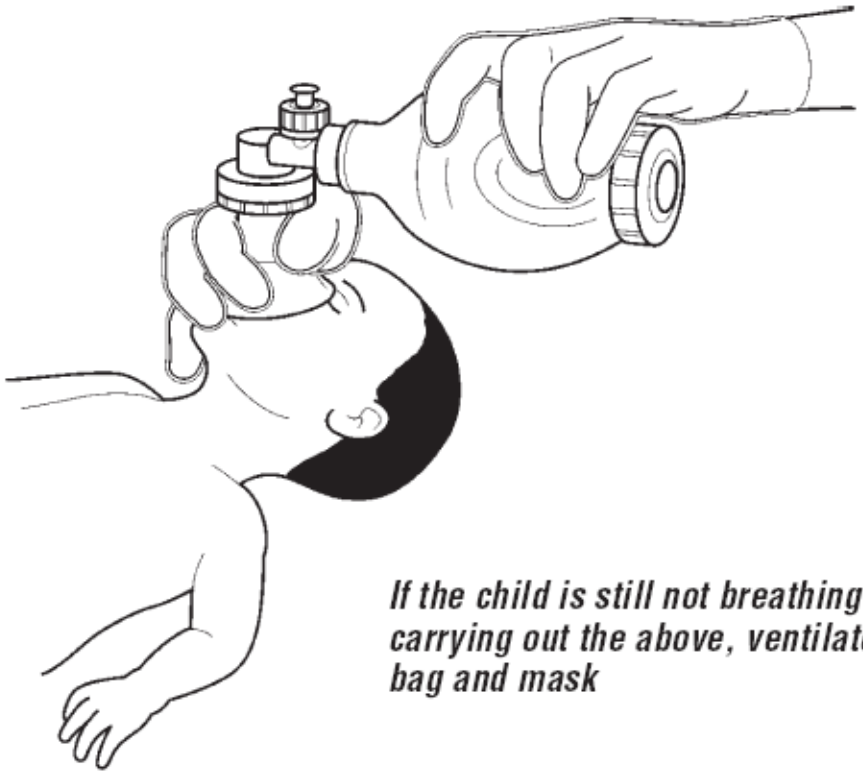
Look, listen and feel for breathing

CHART 4. How to manage the airway in a child with obstructed breathing (or who has just stopped breathing) where neck trauma or possible cervical spine injury is suspected

1. Stabilize the neck, as shown in Chart 6
2. Inspect mouth and remove foreign body, if present
3. Clear secretions from throat
4. Check the airway by looking for chest movements, listening for breath sounds, and feeling for breath



Use jaw thrust without head tilt. Place the 4th and 5th finger behind the angle of the jaw and move it upwards so that the bottom of the jaw is thrust forwards, at 90° to the body



If the child is still not breathing after carrying out the above, ventilate with bag and mask