

Pediatric Airway Foreign Body Pathway

Suspected Airway Foreign Body

Patient is Asymptomatic or Symptomatic but Stable

Patient in Respiratory Distress or Unstable
Emergent Airway Management
Immediate Evaluation by ENT resident/ attending,
Pulmonology fellow/ attending

Triage, Obtain Imaging

ED or UNC Physician Receiving Outside Call
Page On-Call ENT Resident

ENT Resident to Discuss with On-call ENT Attending to Decide Degree of Suspicion

Imaging
AP Neck Film
2 view CXR
Consider Bilateral Decubitus CXRs or CT Scan

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Low Suspicion for Airway Foreign Body
Determine Followup Plan with ENT +/- Ped Pulmonology

Moderate to High Suspicion for Airway Foreign Body
ENT Resident to Page On-call Ped Pulmonology Fellow

Immediate Joint Airway Evaluation with ENT and Pulmonology
ENT and Pulmonology to Decide Whether Pulmonology Will Be Present

