## SKILLS

# **NEEDLE CRICOTHYROTOMY (S05)**

FR/EMR EMT PARAMEDIC

The Rusch Quick Trach is the only needle cricothyrotomy kit approve for use by Tuolumne County EMS Agency. The kit consists of a pre-assembled emergency Quick Trach unit with a 10mL syringe attached to a padded neck strap and connecting tube.

### **Product specifications**

- 1. The adult QuickTrach has a 4mm internal diameter.
- 2. The peds QuickTrach has a 2mm internal diameter.
- 3. Plastic fixation flange and 15mm connector.
- 4. Removable stainless steel cricothyrotomy needle.
- 5. Removable stopper.
- 6. Preassembled and ready to use.

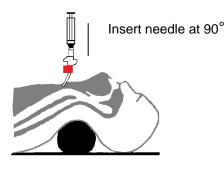
### **Indications**

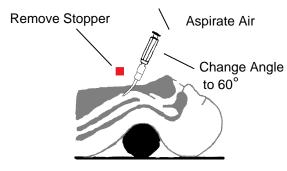
- 1. Upper airway obstruction, which cannot be relieved by other airway obstruction procedures.
- 2. Upper airway trauma with inability to intubate a patient who has severe respiratory insufficiency.

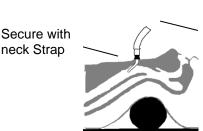
### **Procedure**

- 1. Place the pt in a supine position. Stabilize and hyperextend the neck (unless cervical spine injury suspected).
- 2. Secure the larynx laterally between the thumb & forefinger. Find the puncture site between the thyroid & the cricoid cartilages.
- 3. Firmly hold device and puncture cricothyroid ligament at a 90° angle.
- 4. After puncturing the cricothyroid ligament, check the entry of the needle into the trachea by aspirating air through the syringe. If air is present, needle is within trachea. Now, change the angle of insertion to 60 degrees (from the head).
- 5. Advance the device forward into the trachea to the level of the stopper (red).
- 6. Remove the stopper. After the stopper is removed, be careful not to advance the device further with the needle still attached.
- 7. Hold the needle & syringe firmly, slide only the plastic cannula along the needle into the trachea until the flange rests on the neck. Carefully remove the needle and syringe.
- 8. Secure the cannula with the neck strap.
- 9. Apply the connecting tube to the 15 mm connection and connect the other end to the bag-valve-mask with supplemental oxygen.
- 10. Continue ventilation with 100 percent oxygen and periodically assess the airway.









Connecting Tube to BVM

EFFECTIVE: 11-01-2015