Background

A nasopharyngeal airway (NPA) is used to assist ventilation in an unresponsive patient or to augment airway maintenance with an OPA. A correctly placed NPA will lie just above the epiglottis and will displace the tongue from the posterior wall of the oropharynx.

The important factor that determines efficacy of the device is the length of the tube. The advice of sizing an NPA using the patient’s little finger as a guide has been disproven. In adults there is a relationship between patient height and length of NPA. The average height female requires a size 6 and average height male requires a size 7. Rapid sizing of NPA can be modified from these averages to account for the patient’s height.

In paediatric patients there is a close association between nares-vocal cord distance and nose tip-earlobe distance. Despite the use of NPAs, there is no published data on the benefit of NPA during CPR.

Equipment required

- Range of NPA sizes
- Lubricant
- Nitrile gloves
- Face shield
- Hand sanitizer

Preparation of the procedure

a. Sanitize hands and don personal protective equipment, nitrile gloves and face shield.

b. Select the appropriate NPA size following estimation of patient height. The average height female requires a size six and average height male requires a size seven.

c. Remove the NPA from the packet and lubricate with water-based jelly.

Performing the procedure

a. Lift the nares to reveal the nasal airway and gently place the NPA parallel to the nasal floor, rather than upwards towards the cribiform plate or the ethmoid bone. This avoids insertion into the cranial vault in cases of basal skull fracture and helps to avoid damage of the nasal mucosa.

References


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