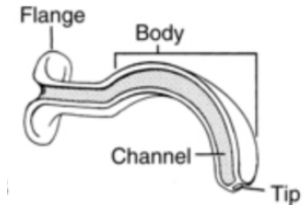




Oropharyngeal airways, also known as OPAs or oral airways, are devices used to assist victims that are unresponsive and therefore unable to maintain their own airway. It is designed to move the tongue and surrounding tissues forward to prevent those structures from falling back and obstructing the glottis. The components of an oral airway include the flange, body, tip and channel.



### WHEN TO USE AN ORAL AIRWAY

The OPA is part of the critical intervention of the Primary Assessment related to airway and comes after a scene assessment to ensure no danger to the rescuer.

Primary assessment:

- Level of consciousness (LOC)
- EMS & AED
- Airway
- Breathing
- Circulation
- **Critical interventions**
- Treat for shock

Oral airways are only to be inserted into unresponsive victims as conscious and responsive victims generally are able to maintain their own airway. Additionally, oral airways should be *not* inserted into victims that are vomiting, choking, have ongoing oral bleeding or are refusing the OPA because of a gag reflex. If a victim gags or vomits following insertion of an oral airway or if the victim begins to seizure, remove the device immediately and clear out any fluids in the mouth.

### SIZING

Oral airways come in many different sizes, ranging from 40 mm for infants to 110 mm for large adults. It is important to measure the correct size of the oral airway for the victim as an oral airway that is too small can potentially cause an obstruction. Because of this, if the measurement obtained from the victim falls between two oral airway sizes, use the larger of the two.



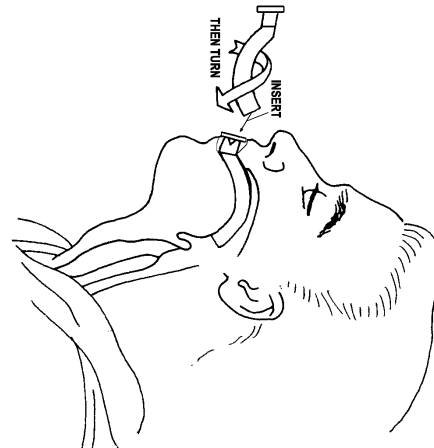
## HOW TO MEASURE AN ORAL AIRWAY

- Measure the distance from the corner of the victim's mouth to the angle of the jaw and match that distance with the body (the curved part) of the oral airway.
- If the measurement falls between sizes, use the larger of the two.



## HOW TO INSERT AN ORAL AIRWAY

- Check the victim's airway to make sure it is clear
- Insert the oral airway with the tip facing up (the body of the OPA should be oriented in the shape of a smiley face)
- Push the oral airway along the roof of the mouth
- As the device approaches the back of the mouth, rotate it half a turn or 180 degrees (turn the smiley face upside down)
- The airway should drop into the mouth without much resistance
- The flange-end rests on the victim's lower lip



## REFERENCES

Canadian First Aid Manual (with 2015 CPR Guidelines) – page 86

Hahn, P. L. (2013). PREREQUISITE NURSING KNOWLEDGE. AACN Procedure Manual for Critical Care-E-Book, 64.

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