



Manual suction is the use of a suction device which acts as a heavy-duty pump that 'vacuums' up vomit and other fluids and solids (e.g., large amounts of water in a drowning victim, blood clots, bits of partially digested food, etc.). It is imperative that a victim's airway is clear of vomit as well as other fluids and solids so that the victim does not choke or inhale it back into the lungs.

WHEN TO USE SUCTION

Suction 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



Positioning a victim in a drainage position is the most effective method to quickly remove vomit and other fluids and solids from the airway. Suction is to be used in cases where proper positioning cannot be maintained, finger sweeping does not successfully clear a victim's airway, or in cases of ongoing fluid airway obstruction. A suction device can be used on unconscious, semi-conscious, or conscious victims, but use it with caution in the event that it triggers vomiting.

THE SUCTION UNIT



There are many different types of suction devices. Some are manual, powered by pumping with the hands or feet; while others are mechanical, driven by a power source. The manual devices are recommended because of the control the rescuer has over the amount of suction. Regardless of the type of suction device, all suction units have a catheter (often adjustable to adult, child and infant sizes) and a cartridge to contain the fluid. Cartridges are one-time use to avoid cross-contamination unless manufacturer's specifications provide disinfection protocols.



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HOW TO USE A SUCTION DEVICE

The four steps to use a suction device are:

- 1) Roll victim into drainage position and finger sweep
- 2) Measure suction catheter
- 3) Insert the suction tip
- 4) Suction the victim's airway



Measure the suction catheter from the corner of the mouth to the angle of the jaw, similar to measuring an oral airway. Insert the tip of the suction device into the mouth only as far as you can see and begin suctioning.

Suction to a maximum of 15 seconds at a time in an adult before reapplying high-flow oxygen. Repeat as necessary with a minimum of 15 second intervals between suctionings.

Remove suction if the victim vomits, the catheter is clogged or there is suction resistance.

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