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Infant Airway Positioning and Bag Mask Ventilation

Practical 06 / Skills laboratory simulation

Aim

Demonstrate airway opening and assisted ventilation on infant and child manikins.

Principle

Position and seal affect ventilation. Visible chest rise and feedback on the practice device help confirm an effective breath.

Materials and Requirements

- Infant and child manikins, size-appropriate masks and self-inflating bag
- Training oxygen setup and instructor scenario card

Procedure

1. Assess response and breathing, call for help and identify any suspected trauma. Select an appropriately sized mask.
2. Assemble the trainer bag, mask and specified oxygen accessories and check flow and valve function according to the station. Choose a mask that covers the nose and mouth without obscuring the eyes.
3. Position infant head in neutral or slight extension as taught. Open the child’s airway with the appropriate manoeuvre. Use the trauma approach and obtain help if injury is suspected.
4. Support the head in the indicated position and reassess patency. In the trauma scenario demonstrate the instructor’s jaw support and stabilisation approach.

Continue with step 5 on the next page.

Procedure Continued

Infant Airway Positioning and Bag Mask Ventilation

5. Place the mask over the nose and mouth and lift the jaw toward it. Demonstrate a two-person seal and bag technique when help is available.
6. Place the mask with its upper edge over the bridge of the nose and maintain jaw support and seal. Practise a two-person position with one learner holding the seal and the other squeezing the bag.
7. Deliver trainer breaths to visible chest rise at the scenario-appropriate rate. If rise is absent, review head position, seal and equipment. Reassess circulation.
8. Observe for gentle chest rise with each breath and avoid excessive ventilation. If chest rise is absent, correct position and seal, check the circuit and escalate unresolved failure.
9. Communicate whether ventilation is adequate and when advanced support is needed.
10. Record position, attempted corrections, chest rise and heart rate or perfusion response. State whether further support is needed and give a clear handover.

Precautions

- Use age-appropriate trainers and avoid overextension of the infant neck.
- Deliver only enough volume for visible chest rise.

Observations and Interpretation

Infant Airway Positioning and Bag Mask Ventilation

Observations and Record

Item	What to record	What it tells you
Position	Age, head position and trauma status	Reduces avoidable obstruction
Mask seal	Fit and visible chest movement	Supports effective ventilation
Reassessment	Response, pulse and need for help	Guides the next team action

Worked Example

On the infant trainer, breaths initially produce no chest rise. Repositioning and a two-person seal restore visible chest movement.

Result and Interpretation

The first attempt did not ventilate effectively. Confirm repeated visible chest rise and reassess as the clinical scenario progresses.

Viva Questions and Answers

What is the immediate visible indicator of an effective trainer breath?

Gentle chest rise.

What are two early checks when the chest does not rise?

Airway position and mask seal.

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