Choking

Summary

- Always call triple zero (000) for an ambulance in an emergency.
- Don’t slap a choking person on the back while they are upright – gravity may cause the object to slip further down the trachea (windpipe).
- First aid for choking adults includes back blows and chest thrusts while the person is leaning forward.
- Toddlers are at risk from choking on food and small items such as buttons or beads. Supervise your child at all times when they are eating.

Air enters the lungs via the trachea (windpipe). Choking is caused when a foreign object, like a hard lump of food, a marble or false teeth goes into the trachea instead of the oesophagus (food pipe). If the object is at the entrance to the trachea (epiglottis), a good cough will more than likely push it out. If the object has made its way past the epiglottis, coughing may prevent the object from going further down the trachea. Sometimes, an inhaled object may cut off the airway completely.

Choking may be a life-threatening medical emergency, because the brain can only survive a few minutes without oxygen.

First aid can save the life of a choking person if applied correctly and immediately. Procedures are different for adults and children. Always call triple zero (000) in an emergency.

The suggestions in this fact sheet are not a substitute for first aid training. Everyone should learn first aid skills.

Symptoms of choking

A person with a partly blocked airway can still breathe, speak or cough. Symptoms include:

- Panicked and distressed behaviour
- Inability to talk in complete sentences or at full volume
- Frantic coughing
- Unusual breathing sounds, such as wheezing or whistling
- Clutching at the throat
- Watery eyes
- Red face.

If the person’s airway is completely blocked and they cannot breathe, speak or cough at all, they will show some or all of the above symptoms including vigorous attempts to breathe, then turning pale and then blue due to lack of oxygen (cyanosis), before collapsing into unconsciousness.

First aid for choking if the person is conscious

To begin with, reassure the person. Encourage them to breathe and cough. If coughing does not remove the blockage:

- Call triple zero (000).
- Bend the person well forward and give five back blows with the heel of your hand between their shoulderblades – checking if the blockage has been removed after each blow.
- If unsuccessful, give five chest thrusts by placing one hand in the middle of their back for support and the heel.

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of the other hand on the lower part of their breastbone – checking if the blockage has been removed after each thrust.

The technique for adults and children is different from that required for babies. You will need to apply different methods for:

- An adult or child – ask the person to lean over with their hands on their knees or sit in a chair leaning forward. The amount of force used on a child is less than that used on an adult
- Baby – place the baby on your lap or forearm, with their head lower than their body. Ensure that you have them in a firm hold. The amount of force is less than that used on a child.

**First aid for choking if the person is unconscious**

If the person becomes unconscious:

- Call triple zero (000).
- Remove any visible obstruction from the mouth.
- Commence cardiopulmonary resuscitation (CPR).

**Cardiopulmonary resuscitation (CPR) to treat choking**

First aid CPR procedure includes:

- Place the person on their back on a hard surface such as the floor (place a baby on a table).
- Tilt the person’s head gently back, pinch the nostrils closed, cover their mouth with yours to create a seal and blow firmly. (Do not tilt a baby’s head back. Instead, cover their nostrils and mouth with your mouth. Blow in puffs.)
- Place the heel of one hand on the lower half of the person’s breastbone. Place the other hand on top of the first hand and interlock your fingers. Keep your fingers up so that only the heel of your hand is on the person’s chest. Use only one hand for children aged between one and eight. Use two fingers for babies.
- Press down firmly and smoothly (compressing to one third of chest depth) 30 times. Then administer two breaths. Repeat at the rhythm of five cycles in two minutes.
- Continue CPR and only stop when the ambulance officers take over or the person recovers.

**Performing first aid on yourself**

If you are choking:

- Try to stay calm. Attract someone’s attention for help.
- Attempt forceful coughing. Lean as far forward as you can. Hold onto something that is firmly anchored, if possible. Breathe out and then take a deep breath in and cough. This may eject the foreign object.
- Don’t let anyone slap you on the back while you are upright. Gravity may cause the object to slip further down your trachea (windpipe).

**Children and choking**

Treatment for a choking child or baby is slightly different than for an adult. The most important thing to remember is never to pat or slap your choking child on the back if they are managing to cough. Your actions may dislodge the object and allow it to be inhaled deeper into the airway.

Note that in a young child, their struggle to breathe may not last long and the stopping of frantic activity may signal a serious or life-threatening situation, rather than a sign that they have dislodged the blockage. Look for other signs and symptoms such as the child’s responses, a pale face, or cold and clammy skin. These are signs that the child is in shock.

**Immediate steps when a child is choking**

When a child is choking:

- Immediately check if the child is still able to breathe, cough or cry. If so, they may be able to dislodge the
object by coughing.

- Do not try to dislodge the object by hitting the child on the back or squeezing the stomach – this may move the object into a more dangerous position and cause the child to stop breathing.
- Stay with the child and watch to see if their breathing improves.
- If the child is not breathing easily within a few minutes, call triple zero (000).
- If, after the coughing settles down, there is any continued noisy breathing or coughing, take the child to see a doctor, as the object may have lodged in the windpipe or airway. If this is the case, it will need to be removed in hospital using a special instrument.

**What to do when the child is not breathing**

If the child is not breathing:

- For a young child (under about five years), place the child face down over your lap so that the head is lower than the chest. For an older child, lay them on their side. Give four sharp blows on the back between the shoulder blades to dislodge the object.
- Check again for signs of breathing.
- If the child is still not breathing, call triple zero (000) and ask for an ambulance. The ambulance service operator will be able to tell you what to do next. You will probably be advised to start expired air resuscitation (mouth to mouth) while waiting for help.
- Do not use the Heimlich manoeuvre (squeezing the abdomen or hitting the child in the abdomen) unless directed to by the ambulance service operator, as this can cause serious damage to organs in the abdomen.

**Precautions to prevent children choking**

Small children are at risk from choking on food and small items such as buttons or beads. Parents can take many precautions to reduce the risk of their child choking.

The molars (back teeth) are used for grinding and mashing foods. Children don't start getting their molars until they are somewhere between 12 and 18 months of age, and it may take a further two years or more until all the molars are through and the child is very good at chewing. This means they are vulnerable to choking on hard foods such as raw carrot, chunks of apple, lollies, popcorn or peanuts.

Suggestions to prevent choking include:

- Hard foods should be cooked, mashed, grated or avoided altogether.
- Cut meat into small, manageable pieces for your child, and remove tough skins from sausages and frankfurters.
- Cut food lengthwise to make it narrower.
- Supervise your child while they are eating.
- Explain to your child the importance of eating food quietly and while sitting down.
- Don't try to feed them if they are laughing or crying.

**Remove choking hazards**

Parents should be aware of potential choking hazards. Suggestions include:

- Treat any object smaller than a ping-pong ball (such as coins, buttons, marbles and beads) as a possible choking threat. Keep these small objects out of your child's reach.
- Polystyrene beads, found in beanbags and some stuffed toys, are easily inhaled. Check toys regularly for signs of wear and tear.
- If you spot a potential choking hazard, remove or secure it immediately.
- Only buy toys from reputable manufacturers. Toys should comply with the Australian Standard AS1647.
- Warning labels on toys, such as 'Not suitable for children under three years', means that small parts may present a choking hazard. The label doesn't refer to skill level.
- Keep balloons away from small children. A bitten balloon may burst and send fragments down the child's throat.

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• Older children in the household should be warned not to leave potentially dangerous items near young children.
• Peanuts are a well-known hazard.

First aid courses for treating children
Emergency medical treatment for young children isn't always the same as for adults, which is why all parents should take a course in paediatric (child) first aid.

Where to get help
• In an emergency, call triple zero (000)
• Emergency department of the nearest hospital
• Your doctor
• Community Information team (formerly Safety Centre), Royal Children’s Hospital Tel. (03) 9345 5085
• Maternal and Child Health Line, Victoria (24 hours) Tel. 132 229
• For first aid training, contact St John Ambulance Australia (Victoria) Tel. 1300 360 455 or Australian Red Cross Tel. 1300 367 428

Things to remember
• Always call triple zero (000) for an ambulance in an emergency.
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