HEALTHEAST MEDICAL TRANSPORTATION MEDICAL OPERATIONS MANUAL

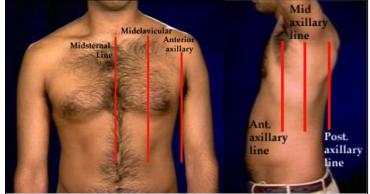
7P CHEST DECOMPRESSION

PATIENT CARE GOALS

• Relieve tension pneumothorax^{1, 2, 3}

PARAMEDIC

- 1. Gather equipment required for the procedure including:
 - ARS Needle Decompression Kit
 - Antiseptic wipes
- 2. Observe body substance isolation precautions (gloves and eye protection).
- 3. If possible roll the patient to the lateral recumbent position with the affected side up. Alternatively, lay the patient supine with the head of the bed elevated 30 degrees.
- Locate the landmark for decompression on the affected side – 4th or 5th intercostal space at the anterior axillary line (see figure, right).
- 5. Cleanse the area with antiseptic wipes.
- Insert the needle into the skin at a 90-degree angle to the chest over the superior border of the rib.



- 7. Upon entering the chest cavity there may be a "pop" and then a hissing sound as air is decompressed from the chest.
- 8. Advance the catheter over the needle and into the chest cavity, removing the needle completely.
- 9. Secure the catheter to the chest wall.
- 10. If the tension pneumothorax recurs repeat the procedure with a new decompression needle.

DOCUMENTATION KEY POINTS

- Indication for procedure
- Signs and symptoms suggesting the presence of a tension pneumothorax
- Location of needle insertion and response to decompression

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NOTES

- ¹ Needle chest decompression is indicated in patients with clinical signs and symptoms consistent with tension pneumothorax such as:
 - Increased airway resistance during assisted ventilation
 - Respiratory distress severe dyspnea and tachypnea associated with
 - Unilateral absence of breath sounds
 - Hyperresonance to percussion on affected side
 - Hypotension
 - o Tachycardia
 - o Cyanosis
 - Respiratory arrest (late sign)
 - Traumatic arrest from blunt force or penetrating trauma to the chest
 - Tracheal deviation toward unaffected side (late sign)
 - Jugular vein distention (late sign)
- ² The most common causes of tension pneumothorax are chest trauma and positive pressure ventilation.
- ³ Needle chest decompression is not indicated for relief of simple pneumothorax that is not hemodynamically compromising.

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