



# CHARLOTTESVILLE-ALBEMARLE RESCUE SQUAD

## Clinical Review and Training

### Insertion of the Laryngeal Mask Airway (LMA) in the Pediatric Patient: Video Post-Test

Name \_\_\_\_\_ EMS Practice Level \_\_\_\_\_

Please review the on-line video prior to completing this test.

1. Where on can you determine the proper size LMA for your infant or toddler?
  - a. On the outside of the LMA kit
  - b. On the CARS Peds Kit inventory list
  - c. On the LMA itself
  - d. All the above
2. Prior to insertion do the following:
  - a. Remove the red tab, inflate the cuff, and lubricate the top of the LMA
  - b. Remove the red tab, deflate the cuff, and lubricate the bottom of the LMA
  - c. Remove the red tab, deflate the cuff, and lubricate the top of the LMA
  - d. Remove the red tab, inflate the cuff, and lubricate the bottom of the LMA
3. How deeply do you insert the LMA into the posterior pharynx?
  - a. Stop as soon as the tongue is covered
  - b. Carefully insert till you feel it is firmly seated in the posterior pharynx (back of the throat)
  - c. It does not matter as long as you can't see the cuff
  - d. Jam it in till you can no longer feel it move
4. Once the LMA has been positioned into the patient's posterior pharynx the cuff is inflated. How much air do you place in the cuff?
  - a. Enough to cause the LMA to move outward
  - b. 20-30 ml of air regardless of size
  - c. None; the LMA cuff does not need to be inflated
  - d. The amount written on the package and/or the LMA itself
5. The LMA does not need to be secured.
  - a. True
  - b. False
6. You are responding to the local ball field for the pediatric code. On arrival you find CPR being performed on a 9 y/o male. What size LMA do you place in this patient. He weighs 25 kg.
  - a. Because he is greater than 20 kg, we would opt to place a 2.0 King airway vs. an LMA
  - b. A 2.0 LMA; being sure to double the recommended cuff volume
  - c. We do not have the proper sized supra-glottic airway; just use a BVM with an OP or NP airway
  - d. Use a pocket mask
7. Because the LMA is a supra-glottic airway, you cannot monitor End-Tidal CO<sub>2</sub>.
  - a. True
  - b. False
8. What are some possible complications with using the LMA
  - a. Inserting the incorrect size
  - b. If the patient vomits, there is a chance of aspiration
  - c. It can move out of position when moving the patient
  - d. All the above