

may pass without symptoms after the initial period. Secondary symptoms are related to the anatomic area in which the object is lodged and are usually caused by a persistent respiratory tract infection distal to the obstruction. FB aspiration should also be suspected in the presence of acute or chronic pulmonary lesions. Often, by the time secondary symptoms appear, the parents have forgotten the initial episode of coughing and gagging. Nasal FBs often manifest by unilateral purulent drainage that does not improve with time.

Radiographic examination reveals opaque FBs but is of limited use in localizing nonradiographic matter. Bronchoscopy is required for a definitive diagnosis of objects in the larynx and trachea. Fluoroscopic examination is valuable in detecting FBs in the bronchi. The mainstay of diagnosis and management of FBs is endoscopy and bronchoscopy. If there is doubt about the presence of an FB, endoscopy can be diagnostic and therapeutic.

Therapeutic Management

FB aspiration may result in life-threatening airway obstruction, especially in infants because of the small diameters of their airways. Current recommendations for the emergency treatment of the choking child include the use of abdominal thrusts for children older than 1 year of age and back blows and chest thrusts for children younger than 1 year old. An FB is rarely coughed up spontaneously. Most frequently, it must be removed instrumentally by bronchoscopy. This procedure usually requires sedation with an agent (such as IV propofol or midazolam) and is carried out as quickly as possible because the progressive local inflammatory process triggered by the foreign material hampers removal. A chemical pneumonia soon develops, and vegetable matter begins to macerate within a few days, making it even more difficult to remove. After removal of the FB, the child is usually observed for any complications such as laryngeal edema and then discharged home within a matter of hours if vital signs are stable and recovery is satisfactory.

Nursing Care Management

A major role of nurses caring for a child who has aspirated an FB is