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# Office of Integrated Health Health & Safety Information

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# **Choking**

Choking (object in the airway) it can be a partial or complete obstruction of the airway can be due to a foreign body (e.g. food, a bead, toy, etc.). Choking can be either from food stuffing behaviors or from dysphagia. Individuals who have been on long term psychotropic medications and suffer from Tardive Diskinesthia are high risk for choking, and the risk is higher if accompanied by abnormal eating behaviors.

#### This is serious and can be fatal!

### **Factors that Increase the Risk of Choking**

Individuals with intellectual/developmental disabilities have a number of factors that increase the risk of choking that include but are not limited to:

- Neuro and muscular disorders such as cerebral palsy and seizure disorders
- Dysphagia (difficulty swallowing)
- Gastroesphogeal reflux disease (GERD)
- Difficulty swallowing
- Few or no teeth
- Placing too much food or medication in one's mouth
- Not chewing food well enough prior to swallowing

- Putting too large a portion in one's mouth
- Eating or drinking too fast
- Inattention to eating
- Poor posture while eating
- Swallowing non-edible objects (Pica)
- Food stealing resulting in obtaining nonprescribed/inappropriate diet, eating quickly, etc.

## Medications can also increase risk of choking

# Common Foods Identified as "High Risk" for Choking

- Hotdogs served whole
- · Chicken on the bone
- Grapes and whole hard fruits such as apples or pears
- Peanut butter especially peanut butter sandwiches on soft bread
- Thick chewy bread, e.g. white bread, bagels, pizza, etc.
- Marshmallows
- Dry, crumbly foods such as cornbread or rice served without butter, jelly, sauce, etc.
- Dry meats such as ground beef served without sauce, gravy
- Whole, raw vegetables served in large bite-sized pieces
- Hard nuts and Candy with large nuts



# **Preventing Choking**

Because of the risk factors associated with choking, it is critical that care givers ensure adequate supervision of persons served, and are trained and familiar with the individual specific protocols focused on meals and meal time behaviors.

### **Emergency Response to Choking**

# 1. Immediately call 911.

If another person is present instruct them to call 911.

- 2. Follow your agency's training for responding to a choking victim.
- 3. If trained, immediately provide repeated abdominal thrusts, known to some as the Heimlich maneuver, until the object causing the choking is dislodged and the individual can cough forcefully, speak or breathe, or until the individual becomes unconscious.
- 4. If the individual is unconscious, remove any visible obstructions from the mouth and begin administering CPR. Check periodically to see if the obstruction becomes dislodged.

### **Important Safety Tips**

- Some people may feel embarrassment when they choke and move away from others. This places them at increased risk because they are less likely to be near people who can help. When food is served, be alert for those who leave without warning and check on them to ensure they are not in need of assistance.
- It is recommended that agencies use regular drills or mock emergencies in order to ensure that when staff recognizes choking they can respond quickly and appropriately to the incident.
- Having all staff trained in CPR and First Aid represents best practice.

#### **Resources**

- American Red Cross (2011). Adult first aid/CPR/AED: Ready reference. Retrieved from <a href="https://www.redcross.org/content/dam/redcross/atg/PDF\_s/Health\_Safety\_Services/Training/Adult\_r">https://www.redcross.org/content/dam/redcross/atg/PDF\_s/Health\_Safety\_Services/Training/Adult\_r</a> eady reference.pdf
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