Medical Alert: Choking Is a Medical Emergency

This Medical Alert is based on the work of the Medical Review Subcommittee and should be posted prominently. The Office of Ombudsman for Mental Health and Developmental Disabilities works to improve the services provided to people with disabilities by communicating important information found in the Medical Review Subcommittee's reviews of deaths and serious injuries. Thank you for promptly reporting deaths and serious injuries. You are helping us to meet our mission.

Since July 2009, the Office of Ombudsman has received 68 reports of choking. Most of these were instances where a client choked while eating. For most of these cases the client was treated immediately with the Heimlich maneuver. 911 was called, and the client was transported to the emergency department for further assessment. Of these 68 reports, 35 were death reports as a result of choking.

Some clients had lived independently and choked on food they were eating at home. Two were out to dinner with family or friends and choked while in a restaurant. Many of the clients had a developmental disability. Some had dementia with known dysphagia. One client was found to have a cancerous tumor blocking her esophagus.

Some of the clients had a known history of choking. Most, but not all, had swallowing assessments and dietary plans in place to reduce their risk of choking. One client with a traumatic brain injury and dysphagia declined dietary modifications knowing it would shorten his life.

A few clients were reported to have choked on vomitus. Others were found to have an inability to swallow their own secretions resulting in recurrent aspiration pneumonia. Many clients choked while at their residences or day treatment and habilitation programs while eating variety of the following items: a grape, watermelon pieces, orange slice, a grapefruit slice, banana, apple, marshmallow, cookies, cake, crumb cake, crackers, peanut butter toast, a peanut butter sandwich, bread, a bun, a muffin, a fatty piece of meat, steak, chicken, a hot dog, a corn dog, a taco, or a chicken bone.

Recommendations from the Medical Review Subcommittee:

- When a client chokes – be prepared to perform the Heimlich maneuver. See the following for further information: http://www.nlm.nih.gov/medlineplus/ency/article/000047.htm.
- Call 911. Even if you are able to clear the airway, it is possible the food has been pushed into the vocal chords or into the lungs. It is important that the client receive a professional medical assessment and that staff be trained to watch for signs of aspiration pneumonia.
- Consult with the client’s primary medical provider to see if a swallowing assessment or medication adjustment is needed.
- In the days following a choking episode, contact the client’s primary medical provider immediately if the person develops a persistent cough or wheezing. These could be signs that the object entered the lung instead of being expelled.

As they age, our clients, especially those with developmental disabilities, may develop early signs of dementia, which can include swallowing difficulties. With appropriate dietary modifications and supervision, they often can continue to safely enjoy eating.

For further information, please go to http://www.nlm.nih.gov/medlineplus/choking.html#cat57