



PAEDIATRIC ACUTE CARE GUIDELINE

Foreign Body - Nasal

Scope (Staff):	All Emergency Department Clinicians
Scope (Area):	Emergency Department

This document should be read in conjunction with this DISCLAIMER
<http://kidshealthwa.com/about/disclaimer/>

Foreign Body - Nasal

Background

- Foreign body insertion in the nose in paediatrics is a common presentation to the ED.
- It is more common in children less than 7 years or those with intellectual impairment.
- Most patients present on the day of insertion but occasionally this may be delayed for days/weeks and can present as an offensive nasal discharge or may be discovered incidentally on routine examination.

General

Types of foreign body

- A large variety of objects have been implicated. These include beads, plastic toys, vegetation and food.
- The most serious retained FB is the button battery that can cause mucosal damage and necrosis.

Children with nasal foreign bodies tend to be younger than other ENT foreign bodies.

History

- Local pain
- Nasal discharge
- Epistaxis
- Admission by child
- Rhinitis

- Difficulty breathing
- Sensation of swelling

Examination

- Foreign body is usually seen on direct vision

Investigations

- Usually none indicated

Management

- Accurate identification of foreign body is essential prior to removal to guide removal technique
- Ensure good lighting preferably with headlight
- A cooperative or restrained patient is necessary and this may require sedation techniques See ED Guideline [Procedural Sedation](#)

Nasal co phenyllocaine may be used to reduce swelling and may help in expulsion of the foreign body.

Removal options

- Forced air using air viva and occlusion of opposite nostril

[gallery ids="6115,6116,6112"]

- Suction - may be used but requires a smooth spherical object provide a good seal
- Forceps - can grasp some objects but often will slip on rounded objects and push the object further in
- Hook – insert along medial wall of nostril with hook pointing cranially and then pass hook behind the object and rotate hook laterally to bring hook behind object and withdraw object
- Irrigation
- Glue on a stick
- ENT referral for fibroptic endoscopy

Complications of removal

- Trauma

- Bleeding
- Aspiration

Nursing

Routine nursing care.


Tags

ent, extraction, fb, forceps, foreign body, nasal, nose, nostril, paperclip, removal, remove, speculum

References

- Isaacson GC, Aderonke O (2014) Diagnosis and Management of Intranasal Foreign Bodies. *UpToDate*. Accessed at www.uptodate.com

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