

INTUBATION CHECKLIST

Please record: 1) Saturations at end of bagging, 2) Lowest saturations during 1st intubation attempt, and 3) Time between (1) and (2)

Plan

- Is the environment optimal?
- Do I need more help?
- Previous difficult intubation/mask ventilation?

Equipment

- ECG, BP cuff (2 minute cycle), saturations, end tidal CO₂
- Bag valve mask, suction (Yankauer), ETT (half size up and down), laryngoscope and blades, ETT tapes, McGill's forceps, Guedel airway, Stylet/Bougie
- Drugs - RSI, rescue drugs (CONSIDER fluid boluses, atropine, adrenaline); check iv line patency

Patient

- Pre-oxygenate - 4 minutes in 100% oxygen
- CONSIDER nasal cannulae for apnoeic oxygenation
- Optimise patient's position
- Inotropes required?
- Aspirate naso/orogastric tube
- Draw up maintenance sedation infusion

Roles

- Role allocation - Team Leader, Airway Assistant (able to give cricoid pressure if needed?), Doctor in charge of drugs, Nurse in charge of drugs, Scribe

Time-out

- Briefing to whole team: Any specific complications expected, contingency plan in case of difficulty
- Does anyone have any questions or concerns?

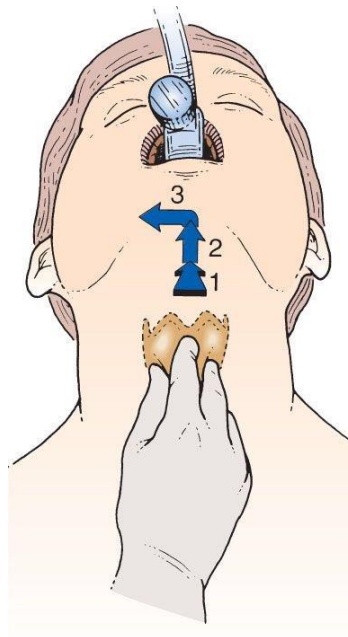
INTUBATION CHECKLIST

Optimise patient's position

- Neck flexion/extension
 - Head position
 - Height of bed

Cricoid Pressure:

B - Backwards
U - Upwards
R - Rightwards
P - Pressure



Apnoeic Oxygenation Flow Rates (standard nasal cannulae):

<1yr: 5L/min
1-10yr: 8L/min
>10yr: 12L/min