

The Jessop Wing
Obstetric Emergency GA Induction Checklist
Are you HAPPE to continue?

History and **H**elp

- Relevant medical and obstetric history?
- GA still necessary? CTG reviewed?
- **Experienced help required? Available?**

Airway Assessment

- Difficult airway risk factors present? If multiple risk factors consider getting help and/or reconsider regional anaesthesia
- **Prepare for difficulty if risk factors present and GA required**

Positioning and cricoid

- Ramped Position? Correct position on Oxford Pillow?
- Check hair/accessories?
- Cricoid Pressure (BURP manoeuvre)
- **Remember to adjust or release cricoid pressure if difficulty encountered at any stage**

Pre oxygenation

- Check oxygen on at 10 L / min
- Good seal & consistent EtCO₂ trace
- **Aim for EtO₂ >85%**
- **Consider assisting ventilation during induction**

Equipment and drugs

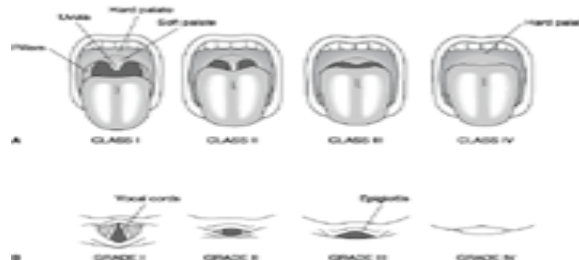
- **Rescue plan for failure or difficulty?**
- Suction ready?
- Maximum 2 intubation attempts (3rd by experience colleague)
- Chosen alternative laryngoscope/SAD ready to hand?
- Bougie, smaller ETT size ready?
- Induction drugs dose adequate +/- opiate? (Check weight)
- **Spare induction agent available?**
- **Suxamethonium 1.5mg/kg minimum (allow time to work)**
- Wake patient or continue surgery in event of airway difficulty?

*Verbal checklist when patient in position on the operating table, monitoring applied, the airway trolley and ODP by the patient and the Anaesthetist commencing pre-oxygenation.

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Risk factors for Obstetric Difficult airway



Patient Risk factors

Age > 30 years

BMI > 30

Consider ethnicity (anatomical changes)

Non English speaking (communication / compliance risk)

Medical History Risk factors

Preeclampsia (oedema risk)

Asthma / Recent URTI (airway irritability risk)

Known difficult airway / previous failed intubation

Snoring / OSA / Raised BMI (Difficult mask ventilation risk)

Sepsis / Morbid obesity / Multiple pregnancy (rapid desaturation risk)

Airway assessment Risk factors

Lack of airway assessment

Poor mouth opening

MP > 1

Short neck, micrognathia

TM distance < 6.5 cm

Unable to sublux jaw

Buck teeth / high arch palate

Situational Risk Factors

Time pressure : Category 1 LSCS (Inadequate assessment / preparation risk)

Transfer directly to theatre from ward or triage (Inadequate assessment risk)

Conversion from regional anaesthesia post surgery commencing (Inadequate access / positioning risk)

Anaesthetic Risk Factors

Inadequate induction doses (Light anaesthesia and awareness risk)

Poor positioning

No cricoid pressure release or adjustment

Absence of back up plans in event of failure