**SKILL: Double Lumen Airway Insertion**

**LEARNER NAME: DATE: / /**

*\*\*Learner expected to introduce him/herself and ask for consent at all times*

|  |  |  |  |  |  |
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| **No** | **PERFORMANCE** | **Possible Points** | **Points Obtained** | **Competent** | **Omitted** |
| 1. | Determine the need for Double Lumen  Airway (Combi-Tube) insertion |  |  |  |  |
| 2. | Endotracheal intubation is unavailable or ineffective |  |  |  |  |
| 3. | *Prepare equipment* |  |  |  |  |
| 3.1 | Check Combi-Tube by inflating and deflating both bulbs and checking for leaks |  |  |  |  |
| 4. | *Insertion (should not exceed 30 seconds)* |  |  |  |  |
| 4.1 | Lubricate lower end of tube |  |  |  |  |
| 4.2 | Lift up patient’s tongue and jaw |  |  |  |  |
| 4.3 | Guide Combi-Tube into patient’s mouth, with the tube’s natural curve pointing inferiorly, following the curvature of the pharynx |  |  |  |  |
| 4.4 | Advance tube gently until the printed black ring rests between the patient’s teeth |  |  |  |  |
| 4.5 | Do not force tube. If resistance is encountered, redirect tube or withdraw and reinsert |  |  |  |  |
| 4.6 | Inject 100ml of air with large syringe into blue pilot bulb (No. 1) |  |  |  |  |
| 4.7 | Inject 15ml of air into clear or white pilot bulb (No. 2) |  |  |  |  |
| 5. | *Establish placement* |  |  |  |  |
| 5.1 | Attach BV-R to blue (longer) connector  (No. 1) |  |  |  |  |
| 5.2 | Attempt ventilation |  |  |  |  |
| 5.3 | a. Auscultate chest for air entry and epigastrium for borborygmi |  |  |  |  |
| 5.4 | b. Observe for rise and fall of chest |  |  |  |  |
| 5.5 | If 5.2 was unsuccessful in ventilating lungs, disconnect BV-R from blue connector & connect to clear (shorter) connector (No. 2) |  |  |  |  |
| 5.6 | Attempt ventilation |  |  |  |  |
| 5.7 | a. Auscultate chest and epigastrium |  |  |  |  |
| 5.8 | b. Observe for rise and fall of chest |  |  |  |  |
| 6. | *Ventilation* |  |  |  |  |
| 6.1 | Ventilate patient through connector which caused chest to expand, where breath sounds were clearly heard over chest and where breath sounds were absent over the abdomen |  |  |  |  |
| 7. | Secure tube in position and recheck tube placement after securing |  |  |  |  |
| 8. | Remove adaptor/connector from tube not being used for ventilation |  |  |  |  |

References:

* PHECC
* AHA

**Overall assessment of learner’s performance:**

**NOT YET COMPETENT**

**COMPETENT**

Assessor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

