

Respond To:
X 523 Dell Street
Bellefonte, PA 16823

713 Bridge St., Suite 18
Selinsgrove, PA 17870



Phone: (814) 355-1474 or
(570) 473-7834
Fax: (814) 355-5149
Web: www.smemsc.org

System Requirements:

ALS Provider:

- Must complete etomidate / sedation-assisted intubation education
- Must complete skill competency assessment by ALS service medical director.
- Clinicians may only perform SAI if credentialed and approved by the service medical director
- Must have continued exposure to intubations as required by service
- Must follow Protocol

PCR Documentation:

- Must Include complete PCR and attached monitor recordings
- Must document indication for intubation, number of intubation attempts, and success/confirmation of each attempt.
- Must document monitor strip showing: Continuous trend of pulse oximetry during intubation, continuous trend of heart rate during intubation, pre and post-intubation BP, heart rate, pulse oximetry, and ECG rhythm.
- Must document post-intubation ETCO₂ reading and continuous monitoring of ETCO₂ (document strip of waveform ETCO₂ recordings)

Approval for continued participation in SAI is contingent upon the required documentation for each SAI used.

ALS Agency Requirements:

- ALS agency will assure education and ongoing competence of all ALS clinicians in ETI, use of alternate airway devices and SAI
- ALS agency will stock various required sizes of a non-surgical alternate/ rescue airway device
- ALS agency will maintain an operational waveform ETCO₂ device for each ALS ambulance
- ALS agency will ensure 100% audit of sedation-assisted intubations

Agency must participate in regional SAI QI and must submit all required documentation for every SAI case.

Agency Medical Director:

- ALS agency medical director will ensure SAI education and training of ALS clinicians
- ALS agency Medical Directors will ensure the competence of each ALS clinician prior to placing etomidate in service

ALS agency Medical Director will oversee agency QI of every SAI case.

Regional EMS Council:

- Regional MAC must determine whether SAI will be permitted within the region
- No service may carry etomidate or perform SAI without prior approval of the regional MAC

Regional MAC oversees the regional QI review of every case of SAI within the region.

Education Requirements:

- Completion and continuing education
- Educated and evaluated by Medical Director
- ALS Clinician competency evaluation
- Active ALS service medical director oversight
- CQI/QI requirements

Warnings:

Not medically necessary or safe for all ALS services in PA. This technique may harm some patients and is not considered to be a standard for ALS care in PA. Systems that choose to use it must follow stringent system requirements to minimize the change of complications and worsened outcomes when using this technique.

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Medication (Generic) Name:	Etomidate
Medication (Trade) Name:	Amidate
Category/Class:	Non-barbiturate hypnotic
Therapeutic Use:	Produce anesthesia and hypnotic effects to facilitate sedation-assisted intubation
Dose:	Dose: Sedation-assisted intubation 15-30 mg (0.3 mg/kg) The dose should not exceed 30 mg
Indications:	Contraindications:
Consider SAI if compromised respiratory effort and partially intact protective airway reflexes. Examples include: Hypoxia (<90% pulse oximetry) despite high-flow oxygen or CPAP Traumatic head injury with GCS <8 Inability to protect the airway	SAI may not be appropriate for patients who have fully intact protective airway reflexes. Consider alternatives if difficult intubation is anticipated Consider hospital ETA Consider nasotracheal intubation if airway reflexes are fully intact or the patient is sitting upright to breath
Side Effects:	Clinician Education:
Pain at the injection site Myoclonus (rapid muscle tremors) during sedation Nausea and vomiting Elderly patients may be more sensitive to effects/duration	Two ALS clinicians must be present before administration Contact Medical command before sedation if required by region/agency Before and during sedation, monitor and continuously record heart rate and oxygen saturation.
Pre-assessment:	Post-assessment:
Consider if this is an acceptable candidate for treatment. Preoxygenate with high-flow oxygen or CPAP Prepare Equipment Ie. Suction operating Stylet in endotracheal tube ETCO2 warmed up and attached to BVM Alternative/Rescue Airway Consider bougie or lighted stylet	Confirm placement of tube utilizing waveform ETCO2 + absence of gastric sounds + bilateral breath sounds Continuous monitoring must be performed of pulse oximetry, heart rate, pre and post-intubation blood pressure, and ECG rhythm.