

# Critical Care, Extubation Checklist

From NAP 4 & DAS guidelines March 2020 (Adapted for Critical Care, NHS Lothian)

Review Date:

**1**

## Planning

- **Senior doctor** aware
- **Two** nurses aware
- Talk through the plan and allocate roles
- **Charge nurse informed**
- **Assess airway risk factors:**
  - Previous difficult airway
  - Obesity
  - Aspiration risk
  - Airway trauma/oedema
  - Obstetric patient
- **Assess general risk factors:**
  - Cardiovascular stability
  - Adequate cough & spontaneous ventilation
  - Awake and cooperative
- **Senior doctor present for high risk extubations and REINTUBATION PLAN formulated**

**2**

## Preparation

- **\*FULL PPE for AGPs\***
- **Optimise the patient:**
  - 100% oxygen / sit pt up
- **Stop sedation**
- **IV access checked**
- **Ensure adequate fasting / aspirate NG tube**
- **Drain subglottic secretions and perform oral suctioning**
- **Check for cuff leak**
- **Inform patient of plan to extubate**
- **Monitoring visible**
  - ECG, SpO<sub>2</sub>, BP, etCO<sub>2</sub>
- **Prepare for post-extubation care**

**3**

## Equipment

- **Suction catheter/closed suction system**
- **Yankauer suction catheter**
- **Suction checked**
- **10ml syringe**
- **Scissors to cut tapes**
- **Consider bite block**
- **Airway trolley available**
- **Stethoscope**
- **Post-extubation oxygen delivery ready & connected to O<sub>2</sub> supply**
  - C-Circuit, filter & mask
  - Facemask
  - NIV /HFNC (not if COVID suspected or confirmed)

**4**

## Extubation

- **Two** nurses aware
- Talk through plans

### RAISE CONCERNS NOW

#### PROCEED:

- Suction oropharynx
- Suction tracheal secretions
- Remove tapes/ties whilst supporting ETT
- Deflate cuff and remove ETT whilst suctioning
- Give prepared supplemental oxygen
- **Observe patient for signs of airway or respiratory compromise:**
  - Airway noise
  - Respiratory pattern
  - SpO<sub>2</sub>/RR

### CALL FOR HELP EARLY

- Check an ABG 30 minutes post-extubation