

## COVID-19 / Suspected COVID-19 Intubation Action Card

### Before:

1. The patient will be nursed in a negative pressure room
2. **Remember your PPE remains the priority. Prior to entering the room, review the PPE guidance for both donning and doffing. Empty pockets before donning. STOP and buddy check PPE.**
3. RSI technique should be used and performed by the most experienced ICU member available. 2 or 3 additional people in the room to act as airway assistant/ cricoids/drugs. Additional person outside the room to act as airway trolley equipment runner.
4. Leave the Intubation trolley outside the room with the runner. Using COVID intubation checklist dry run, **identify all equipment required for Plan A to C prior to entering the room.** Identify plan for getting plan D VBM ScalpelCRIC into room if needed. **Ensure you have Tube clamps**
5. At bedside ensure you pre-assemble:
  - o O2 to C Circuit / BVM to Capnography then HME then mask (check all connections)
  - o Ventilator on pause to separate Capnography to HME to closed circuit suction system (check all connections)

### During:

6. Apply PPE and enter room with intubation equipment
7. Use COVID ICU intubation checklist (laminated copy in all side rooms). Ensure 5 minutes pre oxygenation.
8. Aim to perform RSI with first attempt, best attempt approach
9. Use McGrath VL and Oxford Help pillow if trained.
10. Pre intubation, if possible avoid bagging (**you may have to: de-saturation can be rapid**), use 2 handed mask grip
11. Following intubation, reconnect to C Circuit with etCO2 and HME and **only bag once cuff inflated**
12. Change to pre prepared vent. circuit with separate etco2 and HME and closed suction after tube clamped. Switch C Circuit O2 supply off prior to disconnection. Only start ventilator once circuit connected.

### After:

13. Continue to wear PPE once airway secured.
14. Clean reusable kit such as McGrath / Oxford Help using standard decontamination approach.
15. All other single use equipment and drugs should be disposed of as per HPS guidance.
16. If preparing transfer please review separate Transfer document
17. **Remember your PPE remains the priority. Intubation team to use spotter/buddy to doff PPE**

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