

## SJH Critical Care Guidelines

### Suspected COVID-19 ITU Intubation Action Card

#### Before:

1. The patient will be nursed in a negative pressure room.
2. **Your PPE remains the priority. Prior to entering the room, review the PPE video for both donning and doffing. Empty pockets before donning. STOP and buddy check PPE.**
3. Use of HFNO/NIV prior to intubation should be discouraged and the decision to intubate or not should be made as early as possible when the patient is on a low flow device.
4. RSI technique should be used and performed by the most experienced ICU member available.

#### Recommended personnel:

In Room (1) Critical Care/Anaesthetic Consultant (2) ODP (3) ITU Staff Nurse

**PLUS**

Outside Room (4) ITU Staff Nurse (Runner) – familiar with environment and equipment to act as runner if required. Also needs to be in PPE.

5. Leave the Intubation trolley outside the room with the runner. Using COVID intubation checklist, **identify all equipment required for Plan A to C prior to entering the room.** Identify plan for getting plan D (Surgical Airway – scalpel + BVM) into room if needed.
6. Ensure you pre assemble C-Circuit, Capnography then HME then mask PRIOR to entering room. Ensure closed-circuit suction is taken into the room (for use once patient intubated)

#### During:

7. Apply PPE and use **BUDDY CHECKS** to ensure it is applied properly. Enter room with intubation equipment.
8. Use COVID ICU intubation checklist (laminated copy). Ensure 5 minutes pre-oxygenation.
9. Aim to perform RSI with first attempt, best attempt approach. Use McGrath VL + bougie and Oxford Help pillow if trained.
11. Pre-intubation **AVOID BAGGING** if possible; use 2-handed mask grip
12. Following intubation, **only bag once cuff inflated with system outlined in point 6.**
13. Once satisfactory placement is confirmed (waveform ETCO<sub>2</sub>; auscultation), next step is to move the patient onto the ITU ventilator. **Clamp tube**; attach closed-circuit suction; attach ventilator tubing; remove clamp.

#### After:

14. Continue to wear PPE once airway secured.
15. Clean reusable equipment such as McGrath and Oxford Help using standard decontamination approach.

16. All other single use equipment and drugs should be disposed of as per HPS guidance.

**18. Remember your PPE remains the priority. Intubation team to use buddy system to doff PPE.**