

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, SpO₂, BP, etCO₂
- **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 O₂ 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
 - SpO₂/RR
- **CALL FOR HELP EARLY**
 - Check an ABG 30 minutes post-extubation