|  |
| --- |
| ***MD TASKS*** |
| * **Storz scope at bedside**
 |
| **Identify intubator –Initial/backup attempt** |
| **Confirm Medication Ready**  **Sedative** € Etomidate \_\_\_\_\_\_\_mg € Ketamine \_\_\_\_\_\_\_mg*\*\*Ketamine preferred for possible sepsis* **Paralytic** € Rocuronium \_\_\_\_\_\_mg |
| * **Prepare ETT, plus 0.5 size smaller**
 |
| * **Ensure suction ready**
 |
| **Position:**€ **Towel roll under shoulders small kids**€ **Elevate head large kids** |
| **If sat <95% perform mask CPAP with anesthesia bag until >95%** |
| **Confirm selection of post-intubation medications** |
| ***RN TASKS*** |
| * **Airway cart to bedside**
 |
| **Identify and call needed resources** €RT***Consider Code White*** €ED Pharmacist €PANDA (if available) €PICU RN (if needed) €Peds Anesthesia (if needed) €PICU MD (if needed) |
|  € **Yankhauer suction on full**  |
| **Prepare apneic oxygenation (nas. cannula)** € Maintain throughout intubation |
| **Pre-oxygenation NRB*** **Pre-oxygen timer started**
 |
| **Confirm ETCO2 connected and working** |

|  |
| --- |
| ***MD TASKS*** |
| € **Confirms 3 minutes of uninterrupted** **pre-oxygenation**   |
| € **Confirms Storz scope ready** |
| € **Ensure RN/pharmacist sedative and**  **paralytic medications given in rapid**  **succession** € start paralytic timer with flush |
| € **Ensure 45s since paralytic flush** |
| **Intubation:** € **suction** € **epiglottoscopy**€ **External Laryngeal Manipulation** |
| € **Visualize ETT passing through cords** € No – start re-oxygenation |
| ***RN TASKS*** |
| € **Start attempt timer (45s) from**  **Blade into mouth****Enforce stopping intubation for:**€ 45 seconds since initial blade insertion € N/A€ O2 saturation drops below 92% € N/A |

€ **Administer post intubation medications**

**INTUBATION**

**POST INTUBATION/CONFIRMATION**

Kgs\_\_\_\_\_\_

Drug calculations on back

€ **Confirm ETCO2 present within 20 seconds** € No? – pull ETT and start re-oxygenation

**UNSUCCESSFUL ATTEMPT**

€ **Discuss change in approach**

(position, equipment, intubator, ANE)

€ **Consider LMA placement or bougie**

€ **Prepare needle or surgical cric**

€ **Confirm adequate re-oxygenation**

**Re-oxygenate via BMV until highest achievable sat then maintain for 1 minute before next attempt** (consider use of oral airway as adjunct)

€ **Consider re-dose of sedative if > 10 minutes since last dose**

**Pediatric Intubation Checklist (charge RN facilitates)**

**PREPARATION**