

Emergency Intubation in PICU/CED

- 1) Immediately call for help and resuscitation trolley/airway trolley.
- 2) Ensure senior support notified
 - a. In PICU - contact PICU Consultant/Fellow
 - b. In ED - contact on call CED Consultant/Fellow and notify PICU.
- 3) Give 100% oxygen and assist ventilation with bag and mask if necessary.

HIGH RISK PATIENTS

ASSESSMENT: if ANY of the following present delay intubation, if possible, until senior help is present

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| <ol style="list-style-type: none"> 1) Airway <ol style="list-style-type: none"> a. History of known difficult airway b. Any of the following: small mouth, small jaw, large tongue, short neck, signs of airway obstruction, or trauma or swelling to the face or neck | <ol style="list-style-type: none"> 2) Clinical Status <ol style="list-style-type: none"> a. Unstable haemodynamics b. < 1 yr c. Failed non-invasive ventilation d. Morbidly obese e. C-spine precautions |
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Airway – Intubator and/or Airway Assistant

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| 1) Optimise patient position (ear-sternal notch alignment) | <input type="checkbox"/> |
| 2) Working suction / Yankauer sucker | <input type="checkbox"/> |
| 3) Face mask and Guedal airway of correct size, and bagging system | <input type="checkbox"/> |
| 4) Three endotracheal tubes (age appropriate \pm ½ size and syringe for cuff <ol style="list-style-type: none"> a. Uncuffed = Age/4 +4, Cuffed (balloon checked and deflated) = Age/4 +3.5 b. 3.5 for term neonates | <input type="checkbox"/> |
| 5) Two working laryngoscopes \pm video laryngoscope | <input type="checkbox"/> |
| 6) Bougie – age appropriate | <input type="checkbox"/> |
| 7) Laryngeal mask of correct size | <input type="checkbox"/> |
| 8) Personal protection – mask and gloves | <input type="checkbox"/> |

Bedside/Circulation Nurse

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| 1) Monitoring attached <ol style="list-style-type: none"> a. ECG b. NIBP (cycling q 2min) or arterial line c. SpO2 (not on same limb as BP cuff) d. ETCO2 – calibrated or ETCO2 colour change detector | <input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> |
| 2) Functioning vascular access - flushed | <input type="checkbox"/> |

Medication Nurse (discuss required medications with event manager)

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| 1) Emergency medication sheet printed | <input type="checkbox"/> |
| 2) IV fluid for volume expansion | <input type="checkbox"/> |
| 3) Intubation medications | <input type="checkbox"/> |
| 4) Adrenaline (drawn up if high risk patient) \pm other resuscitation medications | <input type="checkbox"/> |

Event Manager to announce and confirm the plan with the team

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| | <input type="checkbox"/> |
| 1. Personnel: Intubator, assistant, medication giver, timer and documentation | |
| 2. Plan A, Plan B | |
| 3. “Does anyone have any concerns?” | |