

REDUCE STAFF EXPOSURE. REDUCE KIT CONTAMINATION. REDUCE AEROSOL GENERATION. MAXIMISE 1ST PASS INTUBATION

	Airway Doctor 1	Doctor 2	Skilled Assistant	Runner
1	Assemble Team, Drugs and Equipment (List and locations attached)			
2	Brief team (Consider VL if anticipated difficult airway)	Prepare Drugs	Check all kit present and working	Check all kit present and working Maintain outside communication
A: DIRECT LARYNGOSCOPY (Consider VL), MAC 4, BOUGIE. B: I-GEL, REASSESS. C: CONSIDER FACEMACK VENTILATION, DEEPEN PARALYSIS. D: FRONT OF NECK				
3	DON PPE AND ENTER ROOM			REMAIN OUTSIDE
4	Airway assessment Check and Pre-program ventilator settings	Optimise patient position Ensure X2 IV Access Fluid attached and running	Attach and check monitoring Check suction ready DO NOT USE PORTABLE SUCTION	Liaise with Airway Doctor 2 Provide additional kit requested
5	Pre O2: Waters circuit with HME, 2 hands, tight seal. Minimise O2 flows and PEEP: Aim 5 L O2 max			Place silver trolley outside door but at arms reach of the team.
6	40 sec apnoea DESATURATION LIKELY Avoid BVM	Induce anaesthesia RSI (Drugs and doses attached)		Place any requested kit on the trolley Doctor 2 will take the kit from the trolley
7	Intubate patient			Do not hand kit directly to each other
8	Do not start ventilation until cuff up	Confirm tube placement. Capnography, chest movement	Inflate cuff immediately 5-10 ml Connect to ventilator ASAP	Provide communication and logistics with the rest of the hospital
9	Dispose of 3 rd set of gloves after instrumenting airway			Assist with team safety and donning and doffing
10	Ventilation: 6ml/kg ideal BW Titrate PEEP (High requirements)	Sedation: Propofol infusion Pressors: Metaraminol bolus/infusion Invasive lines can wait until critical care (Unless significant delay)	Avoid circuit breaks if possible If circuit break is necessary, turn off ventilator, break distal to HME and clamp tube	
11	Change PPE fully if involved in transfer. Transfer as per COVID transfer policy			
12	All single use equipment in the room must be disposed of. Non disposable equipment must be cleaned with green clinell wipes and chlor-clean solution			

INTUBATION LOCATION

Plan A: Side room Plan B: 2 Metre perimeter around patient

INSIDE: Wall Oxygen, Wall Suction, Sink & Alcogel, Clin waste bin

OUTSIDE: Sink & Alcogel, Clin waste bin

	Airway Doctor 1	Doctor 2	Skilled Assist	Runner
WHO	Most experienced intubator	Anaesthetist/ITU/ED	ODP/ITU Nurse	ODP/ITU/ED Nurse
ROLE	Intubation	Drugs/Haemodynamics/Situational Awareness	Assist Intubation	Support team/Provide kit/Know environment
PPE	Hat/Visor/FFP3 Mask/Surg Gown/Apron/Gloves X3 (+/- shoe covers)	Hat/Visor/FFP3 Mask/Surg Gown/Apron/Gloves X3 (+/- shoe covers)	Hat/Visor/FFP3 Mask/Surg Gown/Apron/Gloves X3 (+/- shoe covers)	Visor/FFP3 Mask/Apron/Gloves X1

DRUGS & EQUIPMENT

PPE Grab Bag	COVID Intubation Grab Bag (M)	COVID Intubation Grab Bag (F)	Transport Monitor	Transport Ventilator	Runner Equipment	Drugs
4 th floor theatres ABG Room ACCU NIC Office A	4 th floor theatres ABG Room ACCU NIC Office A ED intubation tray	4 th floor theatres ABG Room ACCU NIC Office A ED intubation tray	ED ACCU	ED ACCU	ED 4 th floor theatres ACCU	ED 4 th floor theatres ACCU
Hat Visor FFP3 Mask Surgical Gown Apron Donning Instructions Will also need: Gloves x3	Laryngoscope 4 blade Size 8 ETT Gel Bougie 5 Face Mask 5 igel Orange guedel 7 NPA Catheter mount Filter 20ml Syringe Mapleson C Tube Tie Suction catheter In-line suction	Laryngoscope 4 blade Size 7 ETT Gel Bougie 4 Face Mask 4 igel Green guedel 6 NPA Catheter mount Filter 20ml Syringe Mapleson C Tube Tie Suction catheter In-line suction	ECG Leads ECG Dots NIBP Cable NIBP Cuff Sats Probe Capnography tubing	Ventilator tubing 2nd filter at vent end	Sliver trolley Difficult airway trolley (CMAC/McGrath)(Front of neck kit) IV Pumps X2 Medications 50ml Propofol (syringe & tubing) Rocuronium O2 cylinder X2 Consider Crash trolley	Fentanyl 1-2 mcg/kg Ketamine 1-2 mg/kg Propofol 1-2 mg/kg Rocuronium 1.2mg/kg Metariminol 0.5mg bolus to effect

Post Procedure

Ensure PPE & COVID Intubation bags restocked

Debrief points and comments to: