## Royal London Hospital COVID Intubation SOP

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

<table>
<thead>
<tr>
<th></th>
<th><strong>Airway Doctor 1</strong></th>
<th><strong>Doctor 2</strong></th>
<th><strong>Skilled Assistant</strong></th>
<th><strong>Runner</strong></th>
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<tbody>
<tr>
<td>1</td>
<td>Assemble Team, Drugs and Equipment (List and locations attached)</td>
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<tr>
<td>2</td>
<td>Brief team (Consider VL if anticipated difficult airway)</td>
<td>Prepare Drugs</td>
<td>Check all kit present and working</td>
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<td>Maintain outside communication</td>
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<tr>
<td></td>
<td><strong>A:</strong> DIRECT LARYNGOSCOPY (Consider VL), MAC 4, BOUGIE. <strong>B:</strong> I-GEL, REASSESS. <strong>C:</strong> CONSIDER FACEMACK VENTILATION, DEEPEN PARALYSIS. <strong>D:</strong> FRONT OF NECK</td>
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### DON PPE AND ENTER ROOM

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<td>3</td>
<td><strong>Airway assessment</strong>&lt;br&gt;Check and Pre-program ventilator settings</td>
<td>Optimise patient position&lt;br&gt;Ensure X2 IV Access&lt;br&gt;Fluid attached and running</td>
<td>Attach and check monitoring&lt;br&gt;Check suction ready&lt;br&gt;<strong>DO NOT USE PORTABLE SUCTION</strong></td>
<td>Liaise with Airway Doctor 2</td>
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<tr>
<td>4</td>
<td>Pre O2: Waters circuit with HME, 2 hands, tight seal. Minimise O2 flows and PEEP: Aim 5 L O2 max</td>
<td>Induce anaesthesia&lt;br&gt;RSI (Drugs and doses attached)</td>
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<td>Provide additional kit requested</td>
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<tr>
<td>5</td>
<td><strong>40 sec apnoea DESATURATION LIKELY</strong>&lt;br&gt;Avoid BVM</td>
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<td>Place silver trolley outside door but at arms reach of the team.</td>
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<tr>
<td>6</td>
<td>Intubate patient</td>
<td>Confirm tube placement.&lt;br&gt;Capnography, chest movement</td>
<td>Inflate cuff immediately 5-10 ml&lt;br&gt;Connect to ventilator ASAP</td>
<td>Doctor 2 will take the kit from the trolley</td>
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<tr>
<td>7</td>
<td>Do not start ventilation until cuff up</td>
<td></td>
<td></td>
<td>Do not hand kit directly to each other</td>
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<tr>
<td>8</td>
<td>Dispose of 3rd set of gloves after instrumenting airway</td>
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<td>Provide communication and logistics with the rest of the hospital</td>
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<tr>
<td>9</td>
<td><strong>Ventilation:</strong> 6ml/kg ideal BW&lt;br&gt;Titrated PEEP (High requirements)</td>
<td>Sedation: Propofol infusion&lt;br&gt;Pressors: Metaraminol bolus/infusion&lt;br&gt;Invasive lines can wait until critical care (Unless significant delay)</td>
<td>Avoid circuit breaks if possible&lt;br&gt;If circuit break is necessary, turn off ventilator, break distal to HME and clamp tube</td>
<td>Assist with team safety and donning and doffing</td>
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<tr>
<td>10</td>
<td>Change PPE fully if involved in transfer. Transfer as per COVID transfer policy</td>
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<tr>
<td>11</td>
<td>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</td>
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## Intubation Location

**Inside:** Wall Oxygen, Wall Suction, Sink & Alcogel, Clin waste bin

**Outside:** Sink & Alcogel, Clin waste bin

### Airway Doctor 1
- **Who:** Most experienced intubator
- **Role:** Intubation
- **PPE:** Hat/Visor/FFP3 Mask/Surg Gown/Apron/Gloves X3 (+/- shoe covers)

### Doctor 2
- **Who:** Anaesthetist/ITU/ED
- **Role:** Drugs/Haemodynamics/Situational Awareness
- **PPE:** Hat/Visor/FFP3 Mask/Surg Gown/Apron/Gloves X3 (+/- shoe covers)

### Skilled Assist
- **Who:** ODP/ITU Nurse
- **Role:** Assist Intubation
- **PPE:** Hat/Visor/FFP3 Mask/Surg Gown/Apron/Gloves X3 (+/- shoe covers)

### Runner
- **Who:** ODP/ITU/ED Nurse
- **Role:** Support team/Provide kit/Know environment
- **PPE:** Visor/FFP3 Mask/Apron/Gloves X1

## Drugs & Equipment

### PPE Grab Bag
- **Location:** 4th floor theatres ABG Room
- **Contents:** Hat, Visor, FFP3 Mask, Surgical Gown, Apron, Donning Instructions

### COVID Intubation Grab Bag (M)
- **Location:** 4th floor theatres ABG Room
- **Contents:** 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

### COVID Intubation Grab Bag (F)
- **Location:** 4th floor theatres ABG Room
- **Contents:** 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

### Transport Monitor
- **Contents:** ECG Leads, ECG Dots, NIBP Cable, NIBP Cuff, Sats Probe, Capnography tubing, Ventilator tubing, 2nd filter at vent end

### Transport Ventilator
- **Contents:** Sliver trolley, Difficult airway trolley (CMAC/McGrath)(Front of neck kit), IV Pumps X2, Medications 50ml Propofol (syringe & tubing), Rocuronium

### Runner Equipment
- **Contents:** Fentanyl 1-2 mcg/kg, Ketamine 1-2 mg/kg, Propofol 1-2 mg/kg, Rocuronium 1.2mg/kg, Metaraminol 0.5mg bolus to effect

## Location Contents

### Post Procedure
- Ensure PPE & COVID Intubation bags restocked
- Debrief points and comments to: