RSI Checklist for Liberty

Revised August 2023

Preparation

Anatomically difficult airway? If yes, consider avoiding paralytic

Physiologically difficult airway? If yes, page a PICU-ED Team via telemedicine (see laminated sheet on clipboard)

Medications

Atropine: if bradycardia or <12 mos

Sedative: ketamine or etomidate
- no ketamine if < 3 mos
- fentanyl for cardiac pt (4 mcg/kg)

Paralytic: rocuronium

Post-intubation: fentanyl and roc

Pre-oxygenation

CPAP w/ BVM

Consider apneic oxygenation (if preox difficult or patient has low reserve)

Start pre-ox timer

Bagging: 2-person approach is ideal

Consider OG/gastric decompression

Equipment

Confirm with RT, including SGA

Laryngoscopy & Intubation

MENTAL MODEL: Verbally Confirm …

why you are intubating

who is intubating and the blade

SGA will be inserted if attempt fails

>3 min of uninterrupted preox

bedside RN will give RSI meds sedative-flush-paralytic-flush

Sedative & paralytic delivered

Start paralytic timer (45 secs)

Blade inserted

Start attempt timer (45 secs)

Stop attempt

45-second attempt timer alarms

O2 saturation < 95%

This guideline was developed for rapid sequence (medication assisted) intubation in the trauma bay at CCHMC. The guideline is consistent with expert/national recommendations combined with institutional expertise from Emergency Medicine, Critical Care, Anesthesiology, and Respiratory Therapy.

Post-Intubation

Confirmation

ETT through cords on screen? If no, start re-oxygenation

ETCO2 tracing present within 5 breaths? If not, strongly consider pulling the ETT and inserting SGA

Ensure bagging is adequate

Successful intubation

Fentanyl ASAP (2 mcg/kg)

Transition to ventilator

Storz blade in bio bag to SPD

Unsuccessful attempt

Re-oxygenation: Bag for > 1 min at the highest achievable O2 sat

Discuss a <u>specific</u> change in: blade, approach, tube, proceduralist

Re-dose sedative/roc if patient movement or > 2 failed attempts

All staff participating in airway management, at a minimum, should have eye protection, masks, gloves, and a gown.