

Emergency Department Intubation Checklist

<input type="checkbox"/> Consider the indication for intubation	Is NIPPV an option? Is the patient DNI status? Has patient/family consented, if applicable?
<input type="checkbox"/> Preoxygenate with high-flow oxygen	
<input type="checkbox"/> Assess for 1. Difficult laryngoscopy 2. Difficult BVM 3. Difficult cricothyrotomy	Look externally, Evaluate 3-3-2 rule, Mallampati score, Obstruction, Neck Mobility Beard, Obese, No teeth, Elderly, Sleep Apnea / Snoring Surgery, Hematoma, Obesity, Radiation distortion or other deformity, Tumor
<i>If suspected difficult airway, use awake technique</i>	
<input type="checkbox"/> Check for dentures	Dentures in for bag-valve-mask, out for laryngoscopy
<input type="checkbox"/> Position patient	Patient alignment: External auditory meatus to suprasternal notch Bed height: Patient's head to operator's lower sternum
<input type="checkbox"/> Monitoring equipment	Continuous electrocardiogram Pulse oximetry Blood pressure End-tidal capnography (continuous or colorimetric) Two lines preferable
<input type="checkbox"/> IV access	
<input type="checkbox"/> Equipment	Use Breslow tape for sizes in pediatrics
<input type="checkbox"/> Ambu bag connected to oxygen	Verify that source is oxygen and not room air
<input type="checkbox"/> Laryngoscopy handles - verify power	At least two
<input type="checkbox"/> Laryngoscopy blades - verify bulbs	Curved and straight One size larger, one size smaller
<input type="checkbox"/> Suction under patient's shoulder - verify function	If suspected soiled airway (blood, vomitus, secretions), suction under each shoulder
<input type="checkbox"/> Oral airways	At least two
<input type="checkbox"/> Nasal airways	At least two
<input type="checkbox"/> Colorimetric capnometer (If continuous capnography not available)	
<input type="checkbox"/> Endotracheal tubes - verify cuffs	Variety of sizes
<input type="checkbox"/> ETT stylet	
<input type="checkbox"/> ETT securing device (tape if no device available)	
<input type="checkbox"/> Gum elastic bougie	
<input type="checkbox"/> Difficult airway equipment	Cricothyrotomy tools / LMA / Combitube / Glidescope / Fiberoptics
<input type="checkbox"/> Magill forceps if suspected foreign body	
<input type="checkbox"/> Drugs	
<input type="checkbox"/> Pretreatment agents, if applicable	Atropine .02 mg/kg for children <10y if using Sux Lidocaine 1.5 mg/kg for reactive airways or increased ICP Fentanyl 3 mcg/kg if high BP a concern Roc .06 mg/kg or Vec .01 mg/kg if increased ICP and using Sux
<input type="checkbox"/> Induction agent	Etomidate 0.3 mg/kg Propofol 1.5 - 3 mg/kg Ketamine 1-2 mg/kg Midazolam 0.2-0.3 mg/kg Thiopental 3-6 mg/kg
<input type="checkbox"/> Paralytic agent	Succinylcholine 2 mg/kg IV or 4 mg/kg IM Contraindications to succinylcholine: History of malignant hyperthermia Burn or crush injury > 5 days old Stroke or spinal cord injury > 5 days old Multiple sclerosis, ALS, or inherited myopathy Known hyperkalemia (absolute) / Renal failure or suspected hyperkalemia (relative)
<input type="checkbox"/> Rocuronium 1 mg/kg	
<input type="checkbox"/> Vecuronium .15 mg/kg	
<input type="checkbox"/> Normal saline flushes	
<input type="checkbox"/> Phenylephrine for post-intubation hypotension	100 mcg IV push
<input type="checkbox"/> Personnel	MD / RN / RT
<input type="checkbox"/> Post-intubation ventilator settings discussed	A/C FIO2 100% RR 18 [Asthma/COPD: 6-10] TV 8 mL/kg [work down to 6 mL/kg if prone to lung injury] <i>use ideal body weight</i> I/E 1:2 [Asthma/COPD 1:4 - 1:5] Inspiratory Flow Rate 60-80 L/min [Asthma/COPD 80-100 L/min] PEEP 5 cm H2O [CHF 6-12 > watch blood pressure] [PEEP 0 in Asthma/COPD]