

Incident Number: _____

Start Here



Roles

- Identify the lead medic?
- Identify the airway operator?
- Identify who will be holding the BVM?

Pre-procedure

- 4 lead ECG in place
- SpO2 in place (with good pleth)
- EtCO2 with every breath
- Accurate blood pressure
- Correct hypotension

Pre-intubation EtCO2 _____

Pre-intubation respiratory rate _____

Equipment

- Pre-oxygenation assembly (BVM mask, HME, EtCO2, BVM bag, PEEP)
- Intubation kit
- King Vision camera (**Test blade and screen before intubation**)
- Stop watch
- Suction
- C-collar
- I-gel readily available

*P*t ears to sternal notch

*R*aise the mandible

*O*PA/NPA

*T*humbs down masking

*E*tCO2 with every breath

*C*heck PEEP/O2

*T*ension/distension

DSI Pre-oxygenation Procedure

- Administer **Ketamine 2mg/kg**
- Replace EtCO2 Cannula with **standard nasal cannula** at **MAX regulator flow**
- Perform 2 handed mask seal with pre-oxygenation assembly & **set PEEP to at least 5cm/H2O**
 - Adequate breathing & SpO2 >93%: BVM seal** with **NO** ventilation
 - Adequate breathing & SpO2 ≤93%: BVM seal** with **NO** ventilations **AND** increase PEEP
 - Inadequate breathing: BVM seal** and ventilations
- Maintain SpO2 >93% for **at least 3 minutes**
 - Time that SpO2 reached >93% _____:_____**
 - Use stopwatch to record pre-oxygenation duration
- Administer **Rocuronium 1mg/kg** and wait at least 90 seconds or until paralysis is achieved
 - Time Rocuronium Administered _____:_____**

Turn Over

Intubate patient

- Suction the airway

You MUST IMMEDIATELY discontinue attempt if ANY of the Following occur:

- SpO2 drops \leq 93%
- Significant decrease in HR
- Peri-intubation arrest
- If at any point the lead medic calls for "bail out"

Attempt #1	Attempt #2
Attempt start time ____:____	Attempt start time ____:____
Attempt complete time ____:____	Attempt complete time ____:____
Lowest SpO2 during attempt ____%	Lowest SpO2 during attempt ____%
Lowest HR during attempt ____BPM	Lowest HR during attempt ____BPM

Successful	Unsuccessful
<ul style="list-style-type: none"> <input type="checkbox"/> Confirm placement with direct visualization by 2 medics <input type="checkbox"/> EtCO₂ <input type="checkbox"/> Lung and epigastric sounds <input type="checkbox"/> Secure ET tube <input type="checkbox"/> Place c-collar or restrict head and neck movement <input type="checkbox"/> Reassess tube placement <input type="checkbox"/> Deploy ventilator and attempt match pre-intubation ventilatory rate 	<ul style="list-style-type: none"> <input type="checkbox"/> Resume DSI pre-oxygenation procedure on <i>Page 1</i>, and maintain SpO₂ >93% for at least 3 minutes <input type="checkbox"/> Correct any peri-intubation hypotension with fluid bolus/ Nor-epinephrine infusion <input type="checkbox"/> Switch airway operator to a different medic for a second and last attempt <input type="checkbox"/> If second attempt is unsuccessful place i-gel or ventilate until breathing returns <p style="text-align: center; margin-top: 10px;">Once Successful</p>

- Ketamine** 2 mg/kg *slow* IV/IO at least every 30 minutes, **or more frequently if needed.**
Used as a single agent
- Re-assess tube placement frequently and after moving patient