

PATIENT

PLAN

Primary approach: ETT
 Secondary approach: SGA
 BVM+Adjunct
 Can't Oxy, can't Vent: Surg Cric

ASSIGN ROLES

CONTACT MEDICAL COMMAND

Request medication orders for pre- and post-intubation

Pre-OX

HiFlow Nasal Cannula at 10+lpm
 Ear-to-Sternal Notch
 Head of Bed@30°
 OPA/NPA
 BVM +PEEP VALVE

Ventilate PRN

MONITOR

EKG
 BP – q2 min cycle
 SpO2 on hand opposite BP Cuff
 EtCO2 attached to BVM

PREPARATION

Tube Roll Preparation

Prepare and Check Blades (VL if avail)
 ETT (size plus one smaller)
 Syringe – check balloon
 Bougie- Open and Prepared
 Tube holder
 Supraglottic airway
 Add'l airway adjuncts
 Suction tested and running

Medications (dosing chart on reverse)

Ketamine 2mg/kg IV
 Etomidate 0.3 mg/kg IV

IV Fluid running wide open

Pushdose Epi – mixed & labeled

PATIENT GOALS

O2 sat ≥ 94% AND SBP >100

**IF PATIENT GOALS NOT MET –
 DO NOT INTUBATE
 Proceed with Airway Management
 with SGA**

PERFORM

PUSH Sedative Medication

Push-dose Epi

Have Push-dose Epi Immediately available

PERFORM INTUBATION

**IF O2 sat < 94% OR SBP <100
 ABORT ATTEMPT
 Manage Airway with BVM/SGA
 Correct Abnormal Vitals**

If not successful, attempt
MAX 1 additional time

Post intubation

Confirm with waveform EtCO2
Press print to capture waveform
 Repeat VS – intervene as indicated

Additional Sedation

If Ketamine, delay 10-15 min
 If Etomidate, administer per MCP

| Ketamine (IV) for Intubation | | | | | | | |
|--|----------|-----------|----------------|---------|----------|-----------|----------------|
| CONFIRM MEDICATION CONCENTRATION: 100mg/mL | | | | | | | |
| Wt (Kg) | Wt (Lbs) | Dose (mg) | mL of Ketamine | Wt (Kg) | Wt (Lbs) | Dose (mg) | mL of Ketamine |
| 40 | 88 | 80 | 0.8 | 115 | 253 | 230 | 2.3 |
| 45 | 99 | 90 | 0.9 | 120 | 264 | 240 | 2.4 |
| 50 | 110 | 100 | 1 | 125 | 275 | 250 | 2.5 |
| 55 | 121 | 110 | 1.1 | 130 | 286 | 260 | 2.6 |
| 60 | 132 | 120 | 1.2 | 135 | 297 | 270 | 2.7 |
| 65 | 143 | 130 | 1.3 | 140 | 308 | 280 | 2.8 |
| 70 | 154 | 140 | 1.4 | 145 | 319 | 290 | 2.9 |
| 75 | 165 | 150 | 1.5 | 150 | 330 | 300 | 3 |
| 80 | 176 | 160 | 1.6 | 155 | 341 | 310 | 3.1 |
| 85 | 187 | 170 | 1.7 | 160 | 352 | 320 | 3.2 |
| 90 | 198 | 180 | 1.8 | 165 | 363 | 330 | 3.3 |
| 95 | 209 | 190 | 1.9 | 170 | 374 | 340 | 3.4 |
| 100 | 220 | 200 | 2 | 175 | 385 | 350 | 3.5 |
| 105 | 231 | 210 | 2.1 | 180 | 396 | 360 | 3.6 |
| 110 | 242 | 220 | 2.2 | | | | |
| **CONFIRM MEDICATION CONCENTRATION** | | | | | | | |

Unexpected Change in Patient Status?

| | |
|----------|--|
| D | Dislodgement – check EtCO2 |
| O | Obstruction – kinked tube? suction tube! |
| P | Pneumothorax – absent unilateral breath sounds? Needle decompress as indicated! |
| E | Equipment – BVM, O2, ETT Balloon Failure? |
| S | Breath Stacking – Disconnect BVM and squeeze chest |

| Etomidate for Intubation | | | | | | | |
|--------------------------|----------|-----------|-----------------|---|----------|-----------|-----------------|
| Wt (Kg) | Wt (Lbs) | Dose (mg) | mL of Etomidate | Wt (Kg) | Wt (Lbs) | Dose (mg) | mL of Etomidate |
| 40 | 88 | 12 | 6 | 105 | 231 | 31.5 | 15.75 |
| 45 | 99 | 13.5 | 6.75 | 110 | 242 | 33 | 16.5 |
| 50 | 110 | 15 | 7.5 | 115 | 253 | 34.5 | 17.25 |
| 55 | 121 | 16.5 | 8.25 | 120 | 264 | 36 | 18 |
| 60 | 132 | 18 | 9 | 125 | 275 | 37.5 | 18.75 |
| 65 | 143 | 19.5 | 9.75 | 130 | 286 | 39 | 19.5 |
| 70 | 154 | 21 | 10.5 | 135 | 297 | 40 | 20 |
| 75 | 165 | 22.5 | 11.25 | 140 | 308 | 40 | 20 |
| 80 | 176 | 24 | 12 | 145 | 319 | 40 | 20 |
| 85 | 187 | 25.5 | 12.75 | 150 | 330 | 40 | 20 |
| 90 | 198 | 27 | 13.5 | 155 | 341 | 40 | 20 |
| 95 | 209 | 28.5 | 14.25 | 160 | 352 | 40 | 20 |
| 100 | 220 | 30 | 15 | **Confirm Concentration** ** Etomidate 2mg/mL ** | | | |

Push-dose EPINEPHrine

- 1) Label empty 10mL syringe with Push-dose EPInephrine label
- 2) Draw up 1mL of cardiac epi (0.1mg/mL) in empty 10cc syringe using green medication dispenser adapter
- 3) Draw up 9mL Normal Saline & shake
- 4) The syringe now has 10 mL of Push-dose EPINEPHrine 10mcg/mL
- 5) Administer 1-2mL (10-20 mcg) every 2-3 minutes for hypotension (MAP <65) as directed by protocol or medical command order

