

Intubation Checklist: critically ill adults – to be done with whole team present.

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Prepare the patient	Prepare the equipment	Prepare the team	Prepare for difficulty
☐ Reliable IV / IO access ☐ Optimise position ☐ Sit-up?	☐ Apply monitors ☐ SpO₂ / waveform ETCO₂ / ECG / BP	One person may have more than one role.	☐ Can we wake the patient if intubation fails?
 □ Airway assessment □ Identify cricothyroid membrane □ Awake intubation option? □ Optimal preoxygenation □ 3 mins or ETO₂ > 85% □ Consider CPAP / NIV □ Nasal O₂ 	☐ Check equipment ☐ Tracheal tubes x 2 ☐ cuffs checked ☐ Direct laryngoscopes x 2 ☐ Videolaryngoscope ☐ Bougie / stylet ☐ Working suction ☐ Supraglottic airways ☐ Guedel / nasal airways ☐ Flexible scope / Aintree ☐ FONA set	☐ Team Leader ☐ 1st Intubator ☐ 2nd Intubator ☐ Cricoid force ☐ Intubator's assistant ☐ Drugs ☐ Monitoring patient ☐ Runner ☐ MILS (if indicated) ☐ Who will perform FONA? ☐ Who do we call for	 □ Verbalise "Airway Plan is:" □ Plan A: Drugs & laryngoscopy □ Plan B/C: Supraglottic airway Face-mask Fibreoptic intubation via supraglottic airway □ Plan D: FONA □ Pont in the property of the prop
 □ Optimise patient state □ Fluid / pressor/ inotrope □ Aspirate NG tube □ Delayed sequence induction □ Allergies? □ ↑ Potassium risk? - avoid suxamethonium 	☐ Check drugs ☐ Consider ketamine ☐ Relaxant ☐ Pressor / inotrope ☐ Maintenance sedation	help? Who is noting the time?	Does anyone have questions or concerns?

Can't Intubate, Can't Oxygenate (CICO) in critically ill adults





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CALL FOR HELP

Declare "Can't Intubate, Can't Oxygenate"

Plan D: Front Of Neck Airway: FONA

Extend neck

Ensure neuromuscular blockade

Continue rescue oxygenation

Exclude oxygen failure and blocked circuit

Scalpel cricothyroidotomy

Equipment: 1. Scalpel (wide blade e.g. number 10 or 20)

- 2. Bougie (≤ 14 French gauge)
- 3. Tube (cuffed 5.0-6.0mm ID)

Laryngeal handshake to identify cricothyroid membrane

Palpable cricothyroid membrane

Transverse stab incision through cricothyroid membrane

Turn blade through 90° (sharp edge towards the feet)

Slide Coudé tip of bougie along blade into trachea

Railroad lubricated cuffed tube into trachea

Inflate cuff, ventilate and confirm position with capnography

Secure tube

Impalpable cricothyroid membrane

Make a large midline vertical incision

Blunt dissection with fingers to separate tissues

Identify and stabilise the larynx

Proceed with technique for palpable cricothyroid membrane as above

Trained expert only

Other FONA techniques

Non-scalpel cricothyroidotomy Percutaneous tracheostomy Surgical tracheostomy

Post-FONA care and follow up

- Tracheal suction
- Recruitment manoeuvre (if haemodynamically stable)
- · Chest X-ray
- · Monitor for complications
- · Surgical review of FONA site
- · Agree airway plan with senior clinicians
- · Document and complete airway alert

Tracheal intubation of critically ill adults



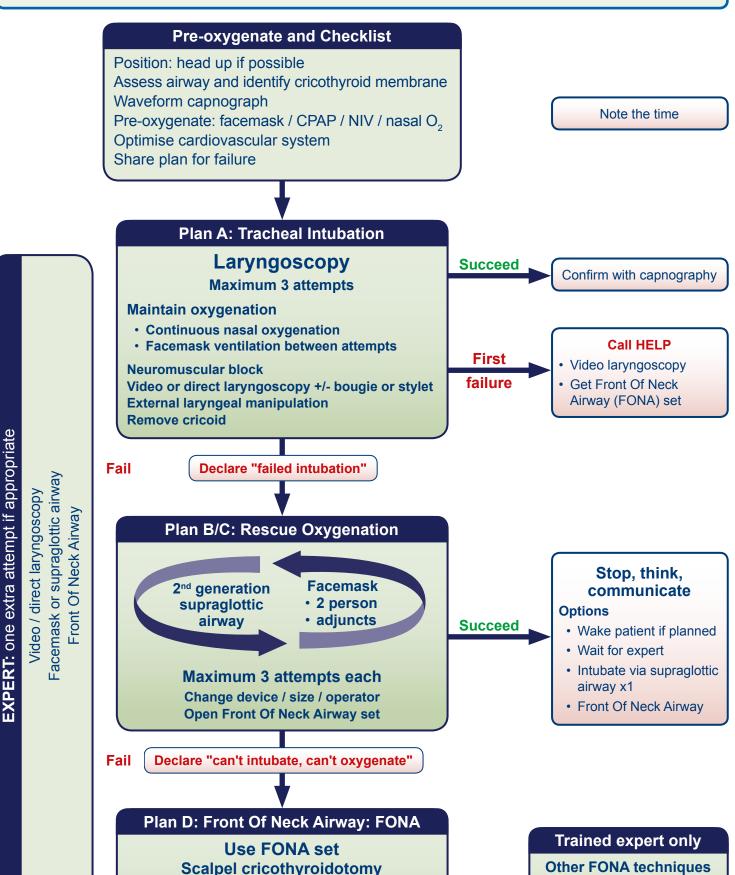


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Non-scalpel cricothyroidotomy Percutaneous tracheostomy

Surgical tracheostomy



Extend neck

Neuromuscular blockade Continue rescue oxygenation