

Emergency tracheal intubation checklist

COVID-19 – CHILD

Personal Protective Equipment

Prepare Equipment

Prepare for Difficulty

In the Room

Post-procedure and Safety

OUTSIDE ROOM

INSIDE ROOM

AFTER AND LEAVING

PPE – be thorough, don't rush

- Wash hands
- Buddy with checklist
- Put on PPE
 - Long sleeved gown
 - FFP3 (or equivalent) mask
 - Gloves
 - Eyewear
 - Headwear and wipeable shoes as per local protocol
- Final buddy check
- Names on visors

Allocate roles:

- A:** Team leader and intubator
 - B:** Cricoid force and intubator's assistant
 - C:** Drugs, monitor, timer
 - D:** Runner (outside)
- Decide who will do eFONA

How does runner contact further help if required?

Weight – drugs and equipment appropriate to child size

- Check kit (kit dump)
 - Mapleson C (or Ayres' T piece) **with HME attached** (preferred to BVM)
 - Catheter mount
 - Guedel airways
 - Working suction
 - Videolaryngoscope (if trained)
 - Bougie/stylet
 - Tracheal tubes x2
 - Tapes and syringe
 - In-line suction ready
 - Tube clamp
 - 2nd generation SGA
 - eFONA set available

Do you have all the drugs required?

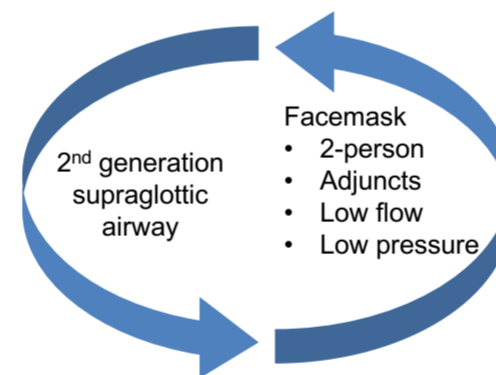
- Ketamine (or other)
- Muscle relaxant (Rocuronium/Other)
- Fluid/Vasopressor/inotrope
- Maintenance sedation

Allergies?

If the airway is difficult, could we wake the patient up?

VERBALISE the plan for a difficult intubation?

- Plan A:** RSI
- Plan B/C:** 2-handed 2-person mask ventilation & 2nd generation SGA



Plan D: Front of neck airway: scalpel bougie tube

Confirm agreed plan

Does anyone have any concerns?

Airway assessment

Identify cricothyroid membrane

Apply monitors

- Waveform capnography
- SpO₂
- ECG
- Blood pressure

Checked i.v or i.o . access (x2)

Optimise position

Firm mattress

Optimal pre-oxygenation

- ≥ 5 min, use low flow oxygen (don't start No NIV or HFNO)
- Pass orogastric tube, decompress stomach

Optimise patient condition before tracheal intubation

- Fluid/vasopressor/inotrope
- Delayed sequence induction?

Now proceed

Airway management

- Inflate cuff before any ventilation
- Check waveform capnography
- Push/twist connections
- Clamp tracheal tube before any disconnection
- Avoid unnecessary disconnections

Other

- Check nasogastric tube inserted
- Consider deep tracheal viral sample

Careful equipment disposal

Decontamination of reusable equipment

Complete and display intubation form

Remove PPE

- Observed by buddy
- Use checklist
- Meticulous disposal
- Wash hands

Clean room after 20 minutes