**Drug Assisted Intubation Skill Sheet**

Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PASS or NOT PASS (circle one)

 Pt. Poss Pt. Earned

|  |
| --- |
| **Pre-Intubation** |
| Provider determines patient needs to be intubated | 1 |  |
| **Prepare the Equipment** |
| Nasal Cannula Applied (if not already on patient) (can be nc w/ capno) | 1 |  |
| Nasopharyngeal Airway  | 1 |  |
| Suction Device with appropriate tubing and suction cath. | 1 |  |
| ET Tube (appropriate size) | 1 |  |
| Video Laryngoscope (tested to see if is in working condition) | 1 |  |
| BIAD  | 1 |  |
| Bougie | 1 |  |
| BVM w/ PEEP Valve  | 1 |  |
| Capnography device for BM | 1 |  |
| Roles Assigned | 1 |  |
| Medications (Ketamine and Rocuronium) | 1 |  |
| **Prepare the Patient** |
| Administer Ketamine 2.0mg/kg slow IV/IO Dose: \_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_ | 1 |  |
| Insert NPA and apply nasal cannula, flow at max flow rate  | 1 |  |
| Applies Sp02 | 1 |  |
| Pre-oxygenate patient with BVM (w/ PEEP)  Starts PEEP at 5cmH20 and increase as needed (max PEEP of 10 cmH20) | 1 |  |
| Ventilate for 3 minutes | 1 |  |
| Position patient at a 30 degree angle (the ear to sternal notch position) | 1 |  |
| Prepare equipment (lays out ET tube, suction, video larynx. BIAD) | 1 |  |
| Measures pre-intubation Sp02 and Capnography | 1 |  |
| **Intubation** |
| Administers Rocuronium (1mg/kg) Dose: \_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_ | 1 |  |
| Ventilates for 90 seconds | 1 |  |
| Use video laryngoscope, 1 attempt (max attempt time 20 seconds) | 1 |  |
| If unable to intubate, aborts attempt and insert i-gel  | 1 |  |
| **Post Intubation** |
| Confirms placement of ET Tube or BIAD | 1 |  |
| Ventilates at a rate of 10/min | 1 |  |
| Secure placement of ET Tube or BIAD | 1 |  |
| Administers Ketamine 1mg/kg every 10 minutes to main sedation \*every 10 minutes from initial does) | 1 |  |
| Measures post-intubation SpO2: \_\_\_\_\_\_\_\_\_\_\_\_\_ | 1 |  |
| Measures post-intubation Capno: \_\_\_\_\_\_\_\_\_\_\_\_ | 1 |  |
| Contact receiving facility to notify of use of DAI | 1 |  |

 Total (26 or more to pass) 31 \_\_\_\_\_

Note

\*If runs out of ketamine, provider may utilize Versed 0.05mg/kg every 3-5 minutes (max 10mg) for sedation

**Critical Criteria** (To pass, no critical criteria can be indicated)

\_\_\_ Failure to identify need for DAI

\_\_\_ Failure to preoxygenate appropriately

\_\_\_ Failure to use video laryngoscope

\_\_\_ Failure to use medication appropriately (proper dose, proper order or continuous sedation)

\_\_\_ Failure to intubate within the time allotted