

Drug Assisted Intubation Check List

Preparation Time Started: _____

- Standard Nasal Cannula
 - NPA
 - Suction
 - ET Tube
 - Video Laryngoscope
 - BIAD
 - Bougie
 - BVM w/ PEEP valve
 - Capnography
 - Tape
 - Roles Assigned
 - Tube Holder
 - Syringe for ETT
 - Ketamine
 - Rocuronium
 - IV/IO Established
- Initial SpO₂(Prior to Intervention): _____

Sedation/Oxygenation

- Ketamine 2.0mg/kg slow IV/IO Dose: _____ Time Given: _____
 - Insert NPA and apply nasal cannula at max flow rate
 - Pre-oxygenate patient with BVM at normal rate
 - Apply inline capnography with BVM
 - Begin PEEP at 5cmH₂O and increase as needed (max PEEP of 10)
 - Ventilate for 3 minutes
 - If resources allow, preform 2 person BVM ventilations
 - Position patient at a 30° angle (the ear to sternal notch position)
 - Prepare intubation equipment (ET tube, video laryn. BIAD, suction, bougie)
- Pre-intubation SpO₂: _____ Pre-intubation Capnography: _____

Intubation

- Administer Rocuronium IV/IO 1mg/kg Dose: _____ Time Given: _____
- Ventilate for 90 second
- Use video laryngoscope, 1 attempt for a max attempt time at 20 seconds
 - If unable to intubate within 20 seconds, abort attempt and insert a BIAD

Post Intubation

- Confirm placement of ET Tube or BIAD
- Ventilate at a rate of 10/min
- Secure placement of ET Tube or BIAD
- Post-intubation SpO₂: _____ Post-intubation Capnography: _____
- Administer Ketamine 1mg/kg every 10 minutes to maintain sedation (from start of initial dose)
- Contact receiving facility to notify of use of DAI
- Med _____ IV/IO Dose: _____ Time Given: _____
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- Med _____ IV/IO Dose: _____ Time Given: _____

Data

Time Completed: _____ Lead Provider: _____

Notes

- *Use of video laryngoscope is required
- *Attempt is defined as the tube advancing towards the trachea (note for pre-loaded tubes, this means the tube pass the end of the blade or if using a non-preloaded blade, it is when the tube passes the teeth)
- *Ensure patient receives Ketamine every 10 minutes after administration of first does, failure can lead to patient being conscious but paralyzed
- *If you run out of ketamine, you may utilize Versed 0.05mg/kg every 3-5 minutes (Max 10mg) for sedation