Intubation Checklist for COVID19 Patient

Safety of the health care team is paramount and during a pandemic, health care worker safety is prioritised over the patient. Effective communication is key. Adapted from: Drs. K Romano, N Chima, E Watson, J Atherstone, J Lohser on behalf of Departments Anesthesiology and Critical Care Vancouver Acute

Intubation Goals

1. **Minimise Aerosol Exposure:**
   - RSI (avoid BMV)
   - Inflate Cuff Prior to Ventilation
   - Clamp ETT Before Circuit Disconnection

2. **Minimise Waste:**
   - Rationalise Kit

Equipment

**Intubation Bag:**
- ETT 7.5 w/ Stylet
- Syringe & Gel
- Glidescope + 4 Blade
- Anchorfast or Tie
- ETT Clamp
- Flex-Tube
- In-Line Suction

**Drugs:**
- Ketamine 200MG
- Rocuronium 200MG
- Phenylephine X 2
- Propofol 1% 100ML
- Norepinephrine Infusion
- Additional drugs available on request

**Crash Bag:**
- Bougie
- ETT 6.5, 7.0, 8.0
- X Glidescope Blade
- LMA 3 & 4 & 5
- DL MAC 3 & 4
- FONA (Bougie/Scalpel) Kit
- ACLS Drug Box & Zoll Defibrillator
- X Stylet

**Anteroom Bag:**
- Plan B Kit (Assembled during brief from Crash Bag)

Team Brief (Lead by Anesthesia / EP)

1. Team Introduction & **Assign Roles**
2. Patient Allergies/Consent/Code Status
3. Empty Pocket Check
4. Review Intubation Plan & Prepare Kit
   - Plan A/B/C
   - RSI Sequence & Drug Dosing — Recommend 1.5MG/KG Rocuronium
   - Prepare **Intubation Bag & Drugs**
   - Prepare **Anteroom Bag** from Crash Bag
5. Room Check
   - Ambu-Bag /OPA/HEPA Filter
   - Capnography
   - Suction + Yanker
   - > 2 IV Pumps
   - IV Access X 2
   - Ventilator + Closed Suction
   - Plastic Drape
6. Cardiac Arrest: **AIRWAY THEN COMPRESSION!**

Team Roles:

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<thead>
<tr>
<th>Intubator/Room Lead</th>
<th>Anteroom Runner (PPE ON)</th>
<th>Second RN</th>
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<tbody>
<tr>
<td>ANESTHESIOLOGIST / EP RT +/- RN</td>
<td>RT +/- RN</td>
<td>Second Anesthesiologist / EP +/- Intensivist</td>
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<td>Drug Administration RN</td>
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<td>Airway Assistant RT</td>
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**Before Room Entry**

- Collect **Intubation Bag & Drugs**
- Collect **Anteroom Bag**
- Collect Additional Discussed Equipment
  +/- CVC, Arterial Line
- DON PPE
- Buddy Check

**Pre-Intubation**

**Ready Intubation Equipment**
- Glidescope + Blade
- ETT w/ Stylet & Syringe
- Anchorfast
- Suction
- Ventilator + Closed Suction + Capnography
- Ambu-Bag (+/- PEEP Valve) + HEPA + Mask + OPA
- Clamp
- Ventilator preset on stand-by

**Check Patient**
- Position
- Monitors
- IV Access X 2
- Prepare Infusions

**Time Out**
- Review Intubation Plan
- Address Concerns
- **Reinforce Key Points to Minimize Exposure:**
  - Avoid BMV
  - Tolerance of Hypoxemia
  - Clamp ETT for Circuit Disconnect

**Intubation**

**PRE-OXYGENATE 3-5 MIN W/ AMBU-BAG**

- RSI

- **TIME 60S + DRAPE**

- **PLAN A**

  - **FAIL**
    - (Alert if Sats < 80%)
    - (If BMV, 2 hand seal, low tidal volume)

- CALL FOR ANTEROOM BAG
  +/- SECOND INTUBATOR
  +/- EXTERNAL CRASH BAG

- **PLAN B**

- **PLAN C**

**Post-Intubation**

**Success**
- Inflate Cuff
- Attach to Closed Suction + HEPA + Ventilator Circuit
- Confirm ETC02
- Secure Tube
- Initiate Sedation Infusion
- Initiate Ventilation Strategy
- Insert NGT

**Before Exit**
- Ensure Patient Stability
- Discard Disposables
- RT Clean Glidescope with AHP Wipes (White Top) then hand off to Anteroom for Second Clean
- DOFF PPE with Observer

**End**

- Wash Exposed Areas
- Hot Debrief; Critical Points
- Restock and Clean Kit
# COVID-19 Emergency Intubation Checklist

## CHECK BEFORE ENTERING ROOM

### Team
- Anaesthesia contacted if difficulty anticipated
- Team introduced:
  - Airway Operator
  - Airway Assistant
  - Team Leader/Drugs
  - In-room Runner: optional
  - Door Runner
  - Outside room Runner
- Problems anticipated?

### Patient
- ECG, BP, Sats
- Pre-oxygenation
  - FIO₂ 100%
  - Sitting position 45°
- IV access x 2
  - 1L fluid on pump set
- Haemodynamics optimised
  - Fluid bolus
  - Pressor
- Problems anticipated?

### Drugs
- RSI drugs drawn up, doses chosen
- Rescue drugs
  - Metaraminol
  - Sugammadex
- Post intubation sedation plan
- Drug C/I or allergies?

### Equipment
- 2 Laryngoscopes (tested)
- Tube chosen; cuff tested
- Bougie/stylet
- 10ml syringe
- Tube tie
- Lubricant
- Supraglottic airway sized to pt
- Scalpel + bougie CICO kit
- Airway trolley/bougie/bronchoscope outside room
- ETCO₂
- Viral filter

## FINAL CHECK IN ROOM

- Patient position optimal
- Fluid runs easily
- Suction working
- Facemask with viral filter connected
- ETCO₂ trace
- O₂ running at 15L.min⁻¹
- Oropharyngeal/nasal airways

Airway plans:
- Plan A: Videolaryngoscopy with bougie/stylet
- Plan B: Supraglottic airway
- Plan C: Vice grip, 2-person +/- Guedel/NPA
- Plan D: Scalpel/bougie/tube