|  |  |  |  |
| --- | --- | --- | --- |
| **Indication** | **Location** | **Urgency** | **Preoxygenation** |
|  Resp failure |  ICU |  Emergent (immediate) |  Not done |
|  Shock |  Ward |  Urgent (within 10 min) |  Face mask |
|  Decr LOC \_\_\_\_\_\_\_\_ |  ER CSICU \_\_\_\_\_\_ |  Elective (> 10 min) |  BMV ± PEEP ± 15L NP NIV IPAP\_\_\_EPAP\_\_\_ |
|  |  |  |

**BVM**

Class 0- Not done

Class 1- easy

Class 2- oral airway

Class 3- 2 hands, 2 operators

Class 4- impossible

Attach MRN

Date: \_\_\_\_\_\_\_ (M/D/YY)

Time: \_\_\_\_\_\_\_ 24hrs

Class 1- easy

|  |  |
| --- | --- |
| Airway assessedAirway strategy verbalized (equipment, plan A, B, C, etc)Sniffing position establishedCricoid pressure or BURPConfirmation with EtCO2 |  |



|  |  |
| --- | --- |
| **Complications** | **YES?** |
| Esophageal Intubation |  |
| Aspiration during intubation |  |
| Endobronchial Intubation |  |
| Pneumothorax |  |
| Cardiac Arrest within 5 min of ETI |  |
| Death related to attempted ETI |  |
| Airway or dental trauma |  |

|  |  |  |
| --- | --- | --- |
| **Technique 1st** | **Technique final** | **Total Attempts** |
|  Macintosh King Vision |  Macintosh King Vision | Reported by:MD #\_\_\_\_\_\_\_\_\_\_\_ |
|  Glidescope |  Glidescope | RT#\_\_\_\_\_\_\_\_\_\_\_\_ |
|  Bougie |  Bougie | **Total Time (min)** |
|  Fiberoptic \_\_\_\_\_\_\_\_\_\_\_\_\_ |  Fiberoptic \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  \_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_\_\_\_\_\_\_\_\_ |  |

**If ≥ 3 Attempts OR if deemed a difficult A/W MD to complete Airway Alert**

|  |  |  |  |
| --- | --- | --- | --- |
| **Vasopressors** | **Dose just prior to ETI** | **Highest during 1st attempt** | **Dose 5 mins post success** |
| Levophed infusion(mcg/min) |  |  |  |
| Other infusion(\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |  |  |  |
| Phenylephrine bolus (mcg) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Vitals** | **Prior to intubation** | **Lowest during attempts** | **5 minutes post intubation** |
| HR |  |  |  |
| SBP / DBP |  |  |  |
| RR |  | ---------- | ---------- |
| SpO2 |  |  |  |
| FiO2 |  | ---------- |  |

|  |
| --- |
| **ETI ATTEMPT BY:****2ND\_\_\_\_\_\_\_\_\_\_\_\_\_\_****3RD\_\_\_\_\_\_\_\_\_\_\_\_\_\_****4TH\_\_\_\_\_\_\_\_\_\_\_\_\_\_****≥5TH\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

|  |  |
| --- | --- |
| **Drugs** | **Yes = √** |
| Fentanyl (mcg) |  |
| Etomidate (mg) |  |
| Midazolam (mg) |  |
| Ketamine (mg) |  |
| Propofol (mg) |  |
| Rocuronium (mg) |  |
| Succinylcholine (mg) |  |
| Lidocaine spray |  |

Normal Saline 500mL

|  |  |  |
| --- | --- | --- |
|  | **Primary (1st) Operator** | **Supervisor** |
| Present |  |  YES NO  |
| Level |  PGY (circle):  1 2 3 4 5 |  Fellow |
|  Fellow |  Consultant / staff |
|  Consultant / staff |  |
|  Respiratory therapist |  |
| Specialty |  Anesthesia  |  Anesthesia |
|  Internal Medicine |  Critical care  |
|  Emergency Medicine |  Emergency medicine |
| Critical Care |  |
|  Other |  |

Comments:

Should this case be reviewed? Y N