

Difficult Airway Bundle Checklist

Date: _____	[Place patient sticker here]
Time: _____	

Planning

Who will attempt to intubate?

- First Attempt: Resident Fellow CRNA Attending Anesthesiologist Other physician
 Second Attempt: Resident Fellow CRNA Attending Anesthesiologist Other physician
 Subseq Attempts: Resident Fellow CRNA Attending Anesthesiologist Other physician

How will we induce?

Induction: IV IO IM inhaled NA – awake intubation

Meds: Fentanyl Midazolam Ketamine Etomidate Lidocaine Anticholinergic NDMR Succinylcholine
 Sevoflurane Propofol infusion / bolus Dexmed infusion / bolus

How will we intubate?

Oxygen supply during intubation: Oral RAE NP Airway Nasal cannula Laryngeal Mask

ETT Type: Regular Cuff Microcuff Uncuffed Parker MLT RAE **ETT Size:** _____

Primary Device: DL Video Laryngoscope AirTraq FB thru LMA Lightwand Fiberoptic

Backup Device: DL Video Laryngoscope AirTraq FB thru LMA Lightwand Fiberoptic

Rescue plan: Who can we call for assistance? Name of Individual: _____
 In emergency: Call 4-CODE and activate "Airway Emergency Response"

Right Attitude: "If anyone has a concern at any time during the procedure, please speak up."

INTUBATION

Use one of the supplemental O₂ techniques below during Tracheal Intubation:



Modified Nasal trumpet connected to circuit with 6L/Min



Oral Rae tube in the corner of the mouth



Nasal Cannula at least 6L/Min flow oxygen

Continuous Ventilation through SGA using a bronchoscopic adapter



After 1st or 2nd attempt by a trainee or CRNA, Attending Anesthesiologists should make all further attempts to intubate.