INTUBATION

Aims:

To give students and junior nurses the confidence and ability to be an airway assistant.

For senior nurses to get an update on some of the current equipment and techniques.

Structure:

This one is not amenable to a case-based discussion.

Start with a description of the equipment.

Stages of the process:

- Preparation
    - Gather equipment
        - Trolley
        - COETT
            - Prepare undersized COETT as well, in case of swollen / narrow airway
        - Laryngoscope
        - Bougie
        - Stylet
        - LMA
        - Cricothyroidotomy kit – need to make sure it is there
    - Assign roles
    - Positioning the patient
        - Draw a sagittal cross-section of the airway
    - Airway technician to dictate plans A through D
- Preoxygenation
    - PREOXYFLOW, THRIVE – validated HFNP apnoeic oxygenation
    - BMV
        - Nasopharyngeal airways, Guedel splints, two-handed technique
    - BiPAP / CPAP
        - Jaw thrust in this context
- Induction

    - Technique tailored to patient situation
    - Talk about midazolam (amnestic, sedative), ketamine (dissociative), propofol (sedative), opioid (sedative, reflex ablation), neuromuscular blockade
    - Talk about route, delayed circulation time in shocked patients
    - Cricoid pressure – no evidence of benefit, can cause difficulty with view
- Laryngoscopy
    - Direct
    - Video
    - Blade selection
    - Fibre optic
- Intubation
    - Concept of intubating conditions
    - Adjunct devices
        - Bougie
            - Please remind everyone to be careful not to push the bougie into the patient as they advance the ETT, as this has happened a few times with the inexperienced assistants.
            - Mention the common hold up getting the bougie through the connector at the end of the tube, as many assistants don't seem to anticipate this.
        - Stylet
        - Interaction of bougie/stylet necessity with blade shape
- Rescue
    - Different technician
    - BMV
    - LMA
    - Cricothyroidotomy

The approach here should focus on familiarising nurses with the equipment and the rationale for use, so that they will understand the decision-making algorithm and be able to anticipate equipment needed.