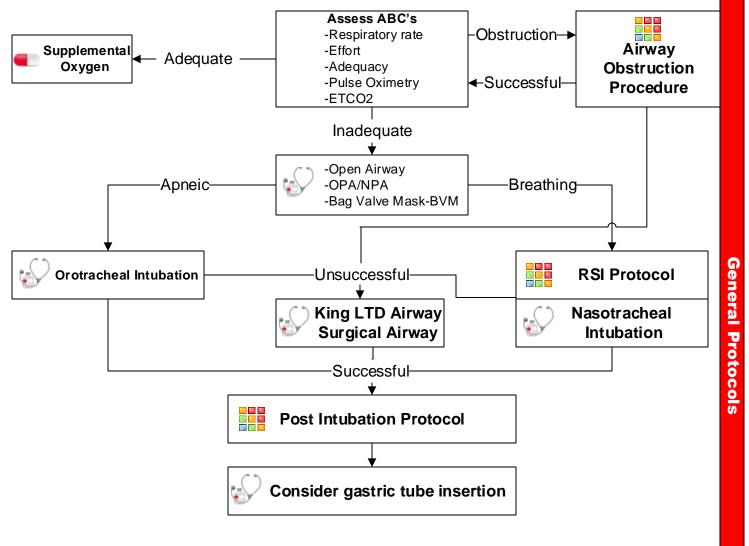
Airway Management





Pearls

SURVIVAL FLIGH

- Capnography is mandatory with all methods of intubation and surgical airway management. Document results.
- Continuous capnography (EtCO2) is required for the monitoring of all patients with a King LTD, ET tube or surgical airway.
- Ventilatory rate should be consistent to maintain a EtCO2 of 35-45. Avoid hyperventilation.
- An Intubation Attempt is defined as passing the laryngoscope blade or endotracheal tube past the teeth or inserted into the nasal passage.
- Providers should consider using a King LTD if oral-tracheal intubation is unsuccessful.
- Use of a surgical airway should be as a last resort during a life threatening situation.
- Sellick's and or BURP maneuver should be used to assist with difficult intubations and ALL RSI cases.
- Hyperventilation in deteriorating head trauma should only be done to maintain a EtCO2 of 30-35.
- Gastric tube placement should be considered in all intubated patients.
- It is important to secure the endotracheal tube well and consider c-collar to better maintain ETT placement.
- A commercial tube holder is required to secure all ET tubes and King LTD Airways.

Protocol 1