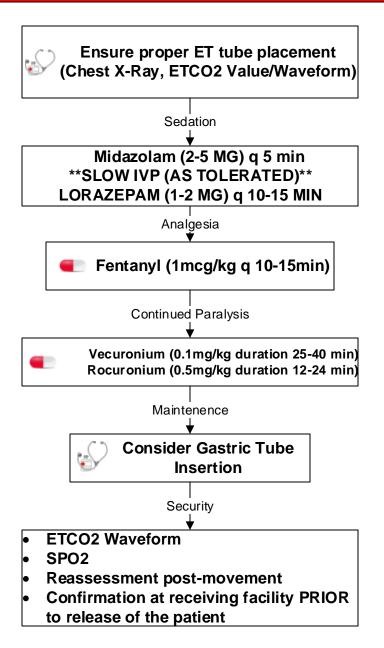


Post Intubation





Pearls

- YOU ARE RESPONSIBLE FOR VENTILATIONS on any patient that has been intubated.
- This procedure will not maintain the patient's airway away so you must be sure of your ability to troubleshoot any problems that may arise.
- The DOPE mnemonic: Displaced (usually right mainstem, pyreform fossa, etc.)
 Obstruction (kinked or bitten tube, mucuous plug, etc.)
 Pneumothorax (collapsed lung)
 Equipment malfunction (ventilator problem, electrical failure, etc.)
- Continuous Waveform Capnography and Pulse Oximetry and are required for intubated patients as well as ongoing
 patient monitoring
- Before administering any continuing paralytic drugs, consider length of transport.
- Protect the patient from self extubation by being proactive with sedation and continued paralysis.
- NEVER administer paralytic medications without sedation and analgesia.

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