

RSI Checklist

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RELATED INFORMATION	4 th National Audit Project (NAP4): Major Complications of airway Management in the United Kingdom. Section 3: Appendices. March 2011

EMERGENCY INDUCTION CHECKLIST

Prepare Patient

Prepare Equipment

Prepare Team

Prepare for difficulty

- Is preoxygenation optimal?
 - ☐ ETO₂ > 90% ☐ Consider CPAP
- Is the patient's position optimal?
 - ☐ Consider sitting up
- Can the patient's condition be optimised any further before intubation?
- ☐ How will anaesthesia be maintained after induction?

- What monitoring is applied?
 - ☐ Capnography☐ SPO₂ probe
 - □ ECG
 - ☐ Blood pressure
- What equipment is checked and available?
 - ☐ Self-inflating bag
 - ☐ Working suction
 - ☐ Two tracheal tubes☐ Two laryngoscopes
 - ☐ Bougle
 - ☐ Supraglottic airway device
- Do you have all the drugs required?
 - ☐ Consider ketamine
 - □ Relaxant
 - Vasopressor

- □ Allocate roles;
 - ☐ Team leader
 ☐ First Intubator
 - ☐ Second Intubator
 - ☐ Cricoid Pressure
 - ☐ Intubator's Assistant
 - □ Drugs
 - ☐ MIL5 (if indicated)
 - Rescue airway

☐ How do we contact further help if required?

- If the airway is difficult, could we wake the patient up?
- What is the plan for a difficult intubation?
 - □Plan A: RSI
 - Plan B: e.g. BMV
 - ☐ Plan C: e.g. ProSeal LMA
 - ☐ Plan D: e.g. Front of neck
- Where is the relevant equipment, including alternative airway?
 - DO NOT START UNTIL

 AVAILABLE
- □ Are any specific complications anticipated?