



Prepare the patient

- Reliable IV / IO access**
- Optimise position**
 - Sit-up?
 - Mattress hard
- Airway assessment**
 - Identify cricothyroid membrane
 - Awake intubation option?
- Optimal preoxygenation**
 - 3 mins or $ETO_2 > 85\%$
 - Consider CPAP / NIV
 - Nasal O_2
- Optimise patient state**
 - Fluid / pressor/ inotrope
 - Aspirate NG tube
 - Delayed sequence induction
- Allergies?**
 - ↑ Potassium risk?
- avoid suxamethonium

Prepare the equipment

- Apply monitors**
 - SpO_2 / waveform $ETCO_2$ / ECG / BP
- Check equipment**
 - Tracheal tubes x 2
- cuffs checked
 - Direct laryngoscopes x 2
 - Videolaryngoscope
 - Bougie / stylet
 - Working suction
 - Supraglottic airways
 - Guedel / nasal airways
 - Flexible scope / Aintree
 - FONA set
- Check drugs**
 - Consider ketamine
 - Relaxant
 - Pressor / inotrope
 - Maintenance sedation

Prepare the team

- Allocate roles**

One person may have more than one role.

 - Team Leader
 - 1st Intubator
 - 2nd Intubator
 - Cricoid force
 - Intubator's assistant
 - Drugs
 - Monitoring patient
 - Runner
 - MILS (if indicated)
 - Who will perform FONA?
- Who do we call for help?**
- Who is noting the time?**

Prepare for difficulty

- Can we wake the patient if intubation fails?**
- Verbalise "Airway Plan is:"**
 - Plan A:**
Drugs & laryngoscopy
 - Plan B/C:**
Supraglottic airway
Face-mask
Fibreoptic intubation via supraglottic airway
 - Plan D:**
FONA
Scalpel-bougie-tube
- Does anyone have questions or concerns?**