

Pre-intubation Checklist

Prepare Patient

- ☐ **History reviewed?** (*previous grade of laryngoscopy, past anaesthetic problems, previous ETT size/length*)
- ☐ **Airway assessment?** (*any features of a predictably difficult airway*)
- ☐ **Adequately fasted?** (*consider risks/benefits of delaying intubation/RSI if not fasted*)
- ☐ **Pre-oxygenated?** (*unless contraindicated*)
- ☐ **Optimal positioning?** (*ear-to-sternal notch - consider shoulder roll in infants or pillow in older child*)
- ☐ **Reliable access?** (*consider IO if difficult*)
- ☐ **Optimal haemodynamics?** (*consider fluid bolus +/- peripheral vasoactive drugs pre-induction*)
- ☐ **NG tube aspirated?** (*consider insertion if not already present*)

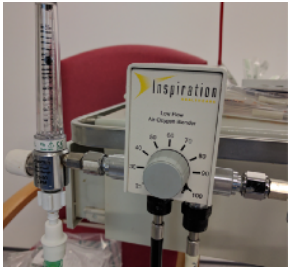
Prepare Equipment

- Monitoring**
 - ☐ **ECG** (*pulse tone on*)
 - ☐ **Capnography** (*in circuit pre-induction*)
 - ☐ **BP** (*cycling every minute in absence of arterial line*)
 - ☐ **SpO₂** (*good trace & not on same limb as BP cuff*)
- Airway Equipment**
 - ☐ All equipment available and working? (*equipment check overleaf completed*)
 - ☐ Additional equipment required? (*e.g. difficult airway trolley, video laryngoscope*)
- Drugs**
 - ☐ Any known allergies/drugs contraindicated?
 - ☐ Induction agents & muscle relaxant dose confirmed? (*↓ induction agent dose if CVS instability likely*)
 - ☐ Emergency drugs to be drawn up (labelled & double checked)?
 - ☐ Atropine
 - ☐ Adrenaline 1 in 100,000
 - ☐ Fluid bolus
 - ☐ Resus drugs

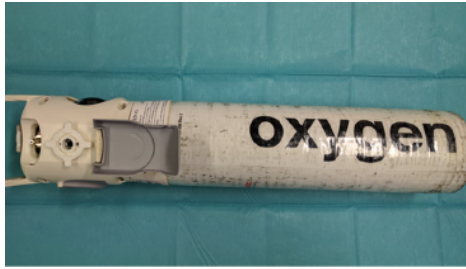
Prepare Team

- Assign Roles**
 - ☐ Team leader
 - ☐ Airway doctor 1
 - ☐ Airway doctor 2
 - ☐ Airway assistant
 - ☐ Drug administration
 - ☐ NGT aspiration (*continuously during face mask ventilation*)
 - ☐ Cricoid pressure
 - ☐ Manual In-line stabilisation
- Prepare for failure**
 - ☐ What is likely to go wrong, who will deal with it and what should they do? (*failure to intubate, cardiovascular instability*)
 - ☐ Is any specialist help required? (*2nd consultant, ENT, trained airway assistant*)
 - ☐ Are we in the best location? (*move to PICU or theatre*)
 - ☐ Any questions or comments?
- Confirm plan**
 - ☐ Plan A
 - ☐ Plan B
 - ☐ Plan C
 - ☐ Plan D

Equipment Check



Mains Oxygen ☐
(blender set to 100% -
unless contraindicated)



Oxygen Cylinder ☐
(backup)



Face Mask ☐
(Inflated and
correct size)



ETCO₂ ☐



Bagging Circuit ☐
(connected to face mask,
ETCO₂ in circuit & O₂ on)



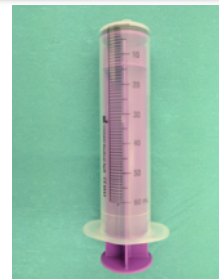
Self Inflating Bag ☐
(backup)



Flexible Suction Catheter ☐
(6CH = ETT 2.5-3.0mm; 8CH = ETT
3.5-4.5mm; 10CH = ETT 5.0-5.5mm; 12CH =
ETT 6.0-6.5mm; 14CH = ETT ≥ 7.0mm)



Yankauer Suction ☐
(connect to suction, test &
leave suction turned on)



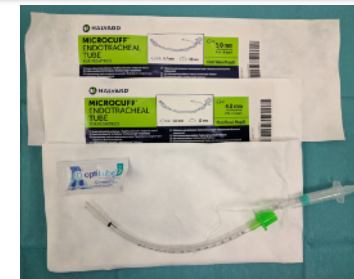
Enteral Syringe ☐
(large syringe to
aspirate NGT)



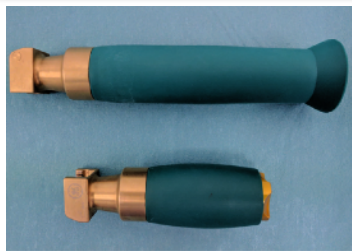
IV Syringe ☐
(ETT cuff)



Lubrication ☐



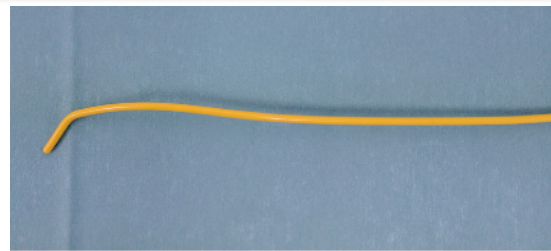
Endotracheal Tube ☐
(correct Size & +/- 0.5 mm; one
lubricated and cuff checked)



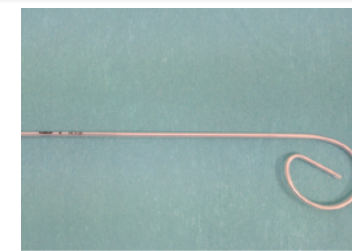
Laryngoscope Handle ☐
(check working & spare
available)



Laryngoscope Blades ☐
(intubator's 1st and 2nd
choice)



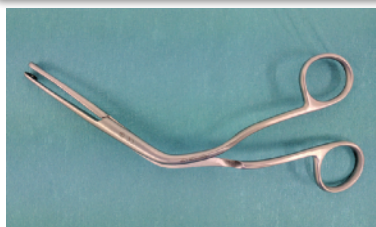
Bougie ☐
(5CH = ETT 2.5 - 3.5mm; 10CH = ETT
4.0 - 5.5mm; 15CH = ETT ≥ 6.0mm)



Stylet ☐
(6CH = ETT 2.5 - 4.5mm;
14CH = ETT ≥ 5.0mm)



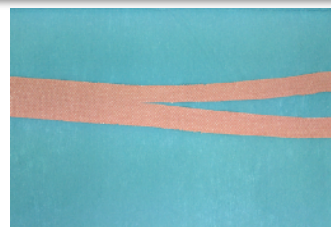
Guedel Airway ☐
(correct size)



Forceps ☐



Scissors ☐



Tapes ☐



Compound Benzoin Tincture ☐



Manometer ☐



Stethoscope ☐