

Airway Management in the Critically Ill

Aim To provide guidance on the provision of emergency airway management for critically ill patients in Queen Alexandra Hospital
Scope All critically ill patients who potentially need advanced airway management, separate to a planned anaesthetic need for a particular surgical procedure

**** All initial referrals for emergency airway management should be directed to the Department of Critical Care ****

Should additional or specific skilled anaesthetic skills be needed, then the ICU team will access the anaesthetic on-call team on BLEEP 1622 (see notes overleaf)

Advanced airway management needed for a critically ill patient

- Ensure 1:1 attention is provided for the patient
- Refer to Department of Critical Care
 - Bleep 1987 (ICU registrar)
 - Extension 5752 (ICU referral phone)
- Ensure monitoring is applied (ECG, NIBP, SpO₂)
- Prepare CAPNOGRAPHY
- Call 2222 if peri-arrest

DCCQ team & processes

- **PERSONNEL:** suitably trained medical and nursing staff will perform advanced airway management interventions
- **EQUIPMENT:** airway trolleys will contain equipment to facilitate difficult airway management plans; contents will be reviewed regularly and be in line with other areas of the hospital
- **MONITORING:** ICS/AAGBI standards will be used when performing airway interventions, including capnography

EMERGENCY DEPARTMENT

ED staff will prepare as per RSI checklist:

- **DRUGS:** get ready the anaesthetic and controlled drugs boxes for airway management
- **MONITORING:** ensure full non-invasive monitoring is attached to the patient, and capnography is prepared
- **DIFFICULT AIRWAY TROLLEY:** move trolley to the patient's bedside
- **PERSONNEL:** assign ED staff to assist with airway management

CHILDRENS ASSESSMENT UNIT (CAU)

The CAU staff will start to make preparations for RSI

- Access/print the relevant SORT guideline for the child's weight
- **DRUGS:** have keys to access anaesthetic, refrigerated and controlled drugs
- **MONITORING:** ensure full non-invasive monitoring is attached to the patient; capnography is prepared
- **PERSONNEL:** assign CAU staff to assist with airway management. Paediatric Consultant or SpR will be present

WARDS

ICU referrals: Appropriate staffing (medical & nursing) will be made available to attend the patient. DCCQ retrieval trolleys will be taken by the team to the patient, providing the necessary monitoring, drugs and equipment to facilitate advanced airway management.

Cardiac arrests: DCCQ medical team will attend as the "airway" component of the cardiac arrest team. The DCCQ team will take grab bags that include drugs and portable capnography suitable to facilitate advanced airway management.

ACCESSING ADVANCED AIRWAY SKILLED PRACTITIONERS

CRITICAL CARE:

ICU REGISTRAR – **bleep 1987**
ICU Consultant – mobile via switchboard

Both can also be mobilised by calling the unit direct
Extension 5752 (referrals)
Extension 6385/6035 (west side unit numbers)

DCCQ nursing coordinator – bleep 1663

ANAESTHETICS:

Duty Anaesthetist (M-F 0800-1700) / 2nd on registrar – **bleep 1622**
Consultant Anaesthetist on call (OOH) – via switchboard
- a consultant is always present at QAH: M-F 0800-2000; Sat/Sun/bank hols
0800-1700hrs

Theatres:

ODP coordinator – bleep 1702
Theatres coordinator – bleep 1829

ACCESSING EMERGENCY ENT ASSISTANCE

ENT registrar – via switchboard
ENT Consultant – via switchboard (ENT secretaries: 6766)
** PLEASE STATE THE URGENCY AND CLINICAL AREA TO BE ATTENDED **

REFERRAL: To ensure appropriate anticipatory plans are made, use RSVP when referring

Reason:	When referring, please state urgency and need. Trauma call or cardiac arrest will automatically trigger attendance by the Critical Care team
Story:	Brief history
Vital Signs:	Provide latest
Plan	Suggested plan of management for the patient. <ul style="list-style-type: none">- Airway protection- Respiratory support- To enable safe transfer for definitive investigations or treatment (eg trauma secondary transfer)- Ongoing management plan

**** EACH CLINICAL AREA'S OWN STAFF ARE RESPONSIBLE FOR CHECKING PROVISION OF EQUIPMENT ****