

# SINGLE SKILL STATION

## Orotracheal Intubation

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### Objective

Demonstrate the procedure for orotracheal intubation.

### Reference

PHTLS: Prehospital Trauma Life Support, 9th ed.

### Evaluation

The instructor will verify the accuracy of the participant's ability to properly manage a simulated airway on a manikin and perform an orotracheal intubation by observing the participant's procedures and technique.

### Materials

- Bag-mask device with mask and reservoir
- Airway adjuncts
- Oxygen
- Suction unit
- Laryngoscope and blades
- Endotracheal (ET) tube with stylette
- Capnography

### Instructor Guidelines

1. Ensure that each participant has all the required materials.
2. Read the objectives and the evaluation method to the participants.

### Performance Steps

1. Verbalize that body substance isolation (BSI) precautions are considered.
2. Open the airway manually.
3. Elevate the tongue and insert a simple adjunct.
4. Ventilate patient with bag-mask device unattached to oxygen.
5. Attach oxygen reservoir to bag-mask device and connect to a high-flow oxygen regulator (12-15 L/min).

6. Ventilate the patient at a rate of 10-12 per minute with appropriate volumes.

*Instructor: After 30 seconds, report to the participant that breath sounds are present equal bilaterally, and medical direction has ordered the insertion of a supraglottic airway. You must now take over ventilation.*

7. Direct the assistant to preoxygenate the patient.
8. Check/prepare orotracheal intubation equipment.
9. Lubricate the distal tip of the ET tube (may be verbalized).

*Instructor: Remove the simple adjunct and move out of the way when the participant is prepared to intubate the patient.*

10. Position head properly.
11. Assess for hypoxia during the intubation attempt.
12. Insert laryngoscope and displace tongue.
13. Elevate mandible with a laryngoscope.
14. Insert the ET tube, advancing to the proper depth.
15. Inflate cuff to proper pressure and immediately remove the syringe.
16. Ventilate the patient and confirm proper tube placement by auscultation and capnography.

*Instructor: Ask the participant, "How would you know that you have proper tube placement?"*

17. Secure ET tube.
18. Suction the patient as needed throughout the intubation attempt and monitoring.
19. Monitor the patient's respirations, ventilations, capnography, pulse oximeter, and tube placement using the D.O.P.E. mnemonic throughout care.
20. Remove gloves and dispose of them appropriately.

### Critical Criteria

1. Failure to preoxygenate patient before intubation.
2. Failure to insert the ET tube at a proper depth or location within three attempts.
3. Failure to confirm that the patient is ventilated properly.
4. Performed procedure in a manner that was dangerous to the patient.