

# SINGLE SKILL STATION

## Supraglottic Airway

Map © iStockphoto/Thinkstock

### Objective

Demonstrate the proper technique for inserting an adjunct airway device.

### Reference

PHTLS: Prehospital Trauma Life Support, 9th ed.

### Evaluation

The instructor will verify the participant's ability to correctly insert a supraglottic airway device in a manikin simulating a patient by observing the student's procedures and technique.

### Materials

- Bag-mask device with mask and reservoir
- Airway adjuncts
- Oxygen
- Suction unit and catheters
- Supraglottic airway device
- Capnography

### Instructor Guidelines

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

### Performance Steps

1. Open the airway manually.
2. Elevate the tongue and insert a simple adjunct.
3. Ventilate patient with bag-mask device unattached to oxygen.
4. Attach oxygen reservoir to bag-mask device and connect to a high-flow oxygen regulator (12–15 L/min).
5. Ventilate the patient at a rate of 10–12 breaths 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.*

6. Direct the assistant to preoxygenate the patient.
7. Check/prepare a supraglottic airway device.
8. Lubricate the distal tip of the device (may be verbalized).  
*Instructor: Remove oropharyngeal airway (OPA) and move out of the way when the participant is prepared to insert the device.*
9. Position head properly.
10. Perform a tongue-jaw lift.
11. Insert the device to the proper depth.
12. Secure the device in the patient.
13. Ventilate the patient and confirm proper ventilation (correct lumen and proper insertion depth) by auscultation bilaterally over the lungs and epigastrium.
14. Adjust ventilation as necessary.
15. Verify proper tube placement by a secondary confirmation such as capnography, capnometry, esophageal detector device, or colorimetric device.  
*Instructor: Ask the participant, "How would you know if you are delivering appropriate volumes with each ventilation?"*
16. Secure device or confirm that the device remains adequately secured.
17. Ventilate the patient at proper rate and volume while observing capnography/capnometry and pulse oximeter.

### Critical Criteria

1. Failure to preoxygenate patient prior to insertion of the supraglottic airway device.
2. Failure to insert the supraglottic airway device at a proper depth or location within three attempts.
3. Failure to confirm that the patient is being ventilated properly (correct lumen and proper insertion depth) by auscultation bilaterally over lungs and over epigastrium.
4. Insertion or use of any adjunct in a manner dangerous to the patient.