



Infrequently Used Skills Verification Checklist Adult Oral Intubation

1110-C

Name:	Date:		
Provider Agency:	Evaluator:		
Objective: Describe the indications for adult oral intubation and demonstrate the ability to proficiently perform the procedure.			
Equipment: Appropriate PPE, adult intubation manikin, laryngoscope handle, adult laryngoscope blades, adult endotracheal tubes, malleable stylet, flex guide ETT introducer, 10 mL syringe, tape or tube holder, stethoscope, oropharyngeal airway (OPA), bag-valve mask (BVM), nasal cannula (NC), non-rebreather mask (NRM), suction device, ETCO ₂ monitoring equipment, 2% lidocaine.			
Performance Criteria: The paramedic will be required to adequately describe the indications for adult oral intubation and proficiently perform the procedure on a manikin.			
Step	Description	Does	Does Not
1	Verbalizes/demonstrates use of appropriate PPE		
2	Verbalizes indications for adult oral intubation <ul style="list-style-type: none">• Cardiac arrest• Respiratory arrest or severe compromise• Sustained altered mental status with GCS \leq 8 (relative indication)• Impending airway edema in the setting of respiratory tract burn or anaphylaxis (relative indication)		
3	Verbalizes the following procedures that should be utilized based on patient condition and circumstances: <ul style="list-style-type: none">• If possible, pre-oxygenate with high flow O₂ via NRM or BVM as appropriate for three (3) minutes• Apply high flow NC (10 – 15 L/min) in addition to NRM or BVM to augment pre-oxygenation• Position patient in a semi-recumbent or reverse trendelenburg position if possible• Continue utilizing passive oxygenation via NC during intubation attempts• Perform jaw thrust to maintain pharyngeal patency and apply airway		
4	Prepares equipment for procedure <ul style="list-style-type: none">• Ensures suction device is available and working• Ensures flex guide ETT introducer is available for difficult intubations• Selects proper size ET tube and checks cuff for patency• Inserts stylet so end is not protruding past end of endotracheal tube• Selects appropriate laryngoscope blade, attaches to handle and checks light		
5	Places patient's head in sniffing position		
6	Instructs other rescuer to stop ventilations and removes OPA (if in place)		
7	May consider cricoid pressure or external laryngeal manipulation (ELM)		



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Step	Description	Does	Does Not
8	Inserts blade into mouth with a right to left sweeping motion while displacing tongue		
9	Applies upward lifting action with laryngoscope without using teeth as a fulcrum		
10	Visualizes glottic opening		
11	Inserts ET tube from right pharynx, passing tube through the glottic opening (intubation attempt should take no longer than 30 seconds)		
12	Removes laryngoscope		
13	Inflates cuff with sufficient volume of air and disconnects syringe		
14	Attaches BVM to ET tube and ventilates at appropriate rate and volume		
15	Confirms airway patency with physical assessment (chest rise, auscultation over the epigastrium and bilaterally over each lung), and appropriate ETCO ₂ monitoring methods based on available equipment		
16	Properly secures ET tube using tape or commercial tube holder		
17	Reevaluates tube placement after each patient movement		
18	Demonstrates proper use of the flex guide ETT introducer for difficult intubations		