

# NEONATAL INTUBATION PAUSE

## EQUIPMENT

- NEOPUFF & MASK
- SUCTION
- VENTILATOR
- CLOCK OR TIMER
- DRUGS:
  - Premedication
  - +/- Surfactant
- AIRWAY:
  - Laryngoscope – conventional/video
  - Laryngoscope blade (000, 00, 0 or 1)
  - Alcohol wipe for VL blade
  - ET tube
  - Introducer
  - Pedi-cap
  - ET tube fixator/tape
  - Stethoscope

## PATIENT

- MONITORING
- ASPIRATE NG TUBE
- PLAN ET POSITION
- POSITION APPROPRIATELY
- MAINTAIN WARMTH
- BABY ADEQUATELY SATURATED

## TEAM

- ALLOCATE ROLES:
  - Team Leader
  - Intubator
  - Airway assistant
  - Drug administration
- TEAM BRIEF:
  - Procedure plan
  - Confirm premedication:
    - FENTANYL
    - ↓
    - ATROPINE
    - ↓
    - SUXAMETHONIUM
    - ↓
    - TUBE
  - Escalation plan
  - Any questions?

## EMERGENCY DRUG DOSES

DRUG	PREPARATION	DOSE
<b>Fentanyl</b>	Pre-made syringe (if available)	5 micrograms/kg = 0.5ml/kg
<b>Suxamethonium</b>	Pre-made syringe (if available)	2 micrograms/kg = 0.5ml/kg
<b>Atropine</b>	600micrgrams/ml	15 micrograms/kg
<b>Adrenaline</b>	1:10,000	0.2ml/kg
<b>Sodium Bicarbonate</b>	4.2%	2ml/kg
<b>Volume</b>	0.9% NaCl or O negative blood	10-20ml/kg

Problems Post Intubation? – Consider “DOPE”

- D** - Displacement or dislodged ETT
- O** - Obstruction (Blocked airway or ETT, ETT at carina or in bronchus)
- P** - Pneumothorax
- E** - Equipment failure