1. Overview
   - Advanced airway management is the subset of airway management that involves high skill and invasiveness. It comprises various medical procedures performed to create an open airway (a path between a patient’s lungs and the outside world).
   - Advanced airway management relies on the use of medical equipment and special training. Invasive airway management can be performed “blind” or with visualization of the glottis e.g. using a laryngoscope.

2. Goal of the Procedure
   - Clearing or preventing obstructions of airways, often referred to as choking, cause by the tongue, the airways themself, foreign bodies or materials from the body itself, such as blood or aspiration.
   - Protecting a patient’s airway from aspiration

3. Reference(s)

4. Required Reading / Review

To access the Clinical Key webpages listed below use the Direct Link Generator and use the second box on the page (below the OR) to put in the following URLs (one at a time) then click “show URL” to generate a link to the video and information (if the page does not display click on the generated link again)

https://www.clinicalkey.com/#!/content/medical_procedure/19-s2.0-mp_AN-003
https://www.clinicalkey.com/#!/content/medical_procedure/19-s2.0-mp_EM-003

5. Required Procedure Competencies
   - **Endotracheal Intubation**
     - Performs a rapid assessment of thorax, oral cavity and airway, verbalizes Mallampati score
     - If patient is already being ventilated, assesses adequacy of effort.
     - Describes need for intubation to patient, as appropriate and as time allows.
     - Directs staff to call for respiratory therapy, ventilator and ICU bed.
     - Verifies there is intravenous access.
     - Assures that needed equipment is present and working prior to attempting intubation and identifies if needed items are missing or inoperable*
       - Properly selects the correct size tube for the patient
       - Discuss anticipating possible bronchoscopy (8mm will fit a bronchoscopy scope)
       - Suction Ambu bag and mask are available and working
     - Briefs the team on the CICO procedure
       - Video scope? CRNA on standby?
     - Positions patient properly.
     - Orders appropriate medications and doses to anesthetize patient.
     - Properly selects the correct Miller (straight blade size 3 medium or 4 for large) or MacIntosh (curved blade)
     - Inserts the laryngoscope into the oropharynx
     - Properly visualizes the vocal cords without leveraging dental work
       - Miller blade lifts the epiglottis
       - MacIntosh blade lifts the vallecular
     - Inserts the Etube just past the vocal cords.
     - Demonstrates inflating both lungs
     - Verbalizes ETCO2.