


**Critical COVID + Patient Response  
Preparing for Emergency Endotracheal Intubation Checklist**

<b>Task</b>	<b>Detail</b>	<b>✓</b>	<b>Comments</b>
<b>Gather Supplies and Equipment; Team Assignments</b>			
<b>Assign staff</b>			* Note names in comments
In room ( <b>Hot Zone</b> )	Clinician	<input type="checkbox"/>	
	Respiratory Tech	<input type="checkbox"/>	
	Nurse inside the door for hand-offs, meds	<input type="checkbox"/>	
	Nurse for patient care	<input type="checkbox"/>	
		<input type="checkbox"/>	
Outside room ( <b>Cold Zone</b> )	Staff, in PPE, to hand off in room—no N-95 unless going into Hot Zone.	<input type="checkbox"/>	Assign to watch doffing post-proc
	PLACARD ROOM ENTRIES: <b>COVID + PATIENT</b>	<input type="checkbox"/>	
	Additional personnel for CPR, if becomes needed		
	Staff to draw add'l meds, pull equipment/runner	<input type="checkbox"/>	
	2 <sup>nd</sup> clinician, skilled with ET intubation	<input type="checkbox"/>	
<b>Hot Zone Equipment</b>	Ventilator with Viral filter	<input type="checkbox"/>	
	Bag Valve Mask with Viral Filter w/ PEEP Valve	<input type="checkbox"/>	
	Lubricating jelly	<input type="checkbox"/>	
	ETCO2 Color Change Detector	<input type="checkbox"/>	
	ETT Tube(S), securing device & in-line suction system	<input type="checkbox"/>	
	10 ml syringe	<input type="checkbox"/>	
	Video Laryngoscope ETT stylet	<input type="checkbox"/>	
	Video laryngoscope with ≥2 adult blade sizes Available (Miller 2, 3, Mac 3, 4)	<input type="checkbox"/>	
	Suction setups including canisters, tubing, Yankauer, regulators, oral Care Supplies	<input type="checkbox"/>	
	2 oxygen regulators	<input type="checkbox"/>	
	Disposable stethoscope	<input type="checkbox"/>	
	Assortment oral and nasal airways	<input type="checkbox"/>	
<b>Cold Zone Equipment</b>	Laryngoscope handle with batteries: ✓ BATTERIES	<input type="checkbox"/>	
	Additional Video Laryngoscope Blades and Stylets	<input type="checkbox"/>	
	LMA 3, 4, & 5	<input type="checkbox"/>	
	MAC/Miller blades & disposable bronchoscope	<input type="checkbox"/>	
	Additional ET TUBES, preselected Bougie	<input type="checkbox"/>	
	Cricothyrotomy Kit w/ skin prep, sterile towels	<input type="checkbox"/>	
	Ultrasound with probe covers, US Gel	<input type="checkbox"/>	

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	Central Line with IV Caps / Arterial Line Kit	<input type="checkbox"/>	
	I/O KIT	<input type="checkbox"/>	
	Code cart	<input type="checkbox"/>	
	Defibrillator/Pacer with appropriate pads	<input type="checkbox"/>	
<b>Medications</b>	IV FLUIDS (LR or NS - 1 liter)	<input type="checkbox"/>	Draw up outside of room and label
	RESPIRATORY: Epinephrine 0.3mg IM, Terbutaline 0.25mg SQ, Albuterol MDI	<input type="checkbox"/>	
	Induction: Propofol, Etomidate, Ketamine	<input type="checkbox"/>	
	PARALYTIC: Succinylcholine, Rocuronium or Cisatracurium	<input type="checkbox"/>	
	Paralytic Reversal Agents (Ex: Sugammadex)		
	NARCOTIC: Fentanyl push dose	<input type="checkbox"/>	
	POST SEDATION: Pre-Prime Propofol tubing for infusion	<input type="checkbox"/>	
	Prefilled and LABELED vasopressor: Phenylephrine, ephedrine	<input type="checkbox"/>	
	Norepinephrine infusion	<input type="checkbox"/>	
<b>Just prior to entering room</b>			
Room readiness timeout	Assess patient/environment for equipment needs	<input type="checkbox"/>	Are all boxes checked above
	Perform pre procedure patient safety timeout		
	Check PPE	<input type="checkbox"/>	
<b>Post Procedure</b>			
<b>Observer</b> watches doffing	Wipe gloves & arms of PPE per hospital protocol <i>before</i> doffing	<input type="checkbox"/>	Watches through door
	DOFF ALL PPE EXCEPT N95 in room	<input type="checkbox"/>	
	Instruct on hand hygiene	<input type="checkbox"/>	Prior to opening door
Huddle	What went well/What didn't go well	<input type="checkbox"/>	To identify for future PI
	Were supplies/equipment appropriate		