Mangum Regional Medical Center

PURPOSE:

To establish a standard of care in Rapid Sequence Intubation.

PROCEDURE:

1. Prepare: Equipment, medications, medical team, patient basic airway management, and positioning.
2. Pre-oxygenate: 100% O2 for 3-5 minutes, add nasal cannula @ 4L/min.
3. (Optional): Pre-medications: Atropine 0.02mg/kg IV (max dose: 0.5mg) all infants less than 1 year old.
4. IV push sedative: USE ONLY ONE OF THE FOLLOWING:
    a. Etomidate 0.2-0.6 mg/kg IV push over 30-60 seconds
    b. Midazolam 0.2-0.3 mg/kg IV push for adult patients
    c. Midazolam 0.1-0.4 mg/kg IV push for pediatric patients
    d. Midazolam 0.05-0.1 mg/kg IV push for neonates
    e. Ketamine 1-2 mg/kg IV push over 30-60 seconds. Avoid use for eye injury, head trauma, and stroke/CVA (cerebrovascular accident)
5. Paralytic: USE ONLY ONE OF THE FOLLOWING
    a. Rocuronium 0.6-1.2 mg/kg IV push (adults and peds)
    b. Rocuronium 0.45-1.2 mg/kg IV push (neonates)
    c. Vecuronium 0.15 mg/kg IV push over (adults)
    d. Vecuronium 0.15-0.2 mg/kg IV push (peds)
    e. Vecuronium 0.1 mg/kg IV push (for neonates and infants less than 7 weeks old)
    f. Wait for 60-120 seconds for medication to have full-effects. Do not bag unless hypoxic: turn up nasal cannula to 15L/minute to minimize de-saturation
6. Position airway: head/neck position; laryngeal manipulation; BURP (cricoid pressure) as needed.
7. Pass the tube: maintain in-line cervical immobilization in head/neck trauma.
8. Patent airway assessment: use EID (Esophageal Intubation Detector), check breath sounds, end-tidal CO2, and chest x-ray.
9. Post-intubation plan: Medications and dosages depend of medications used during intubation.

a. Analgesia:
    i. Fentanyl 1-3 mcg/kg IV over 1-2 minutes as needed
    ii. Morphine 0.05-0.2 mg/kg IV push as needed
b. Paralysis:
    i. Vecuronium 0.1mg/kg IV every 60 minutes as needed
c. Sedation
    i. Midazolam IV 50mg in Normal Saline 0.9% 250mL

Table 1: Midazolam IV Drip Titration Table

Desired Dosage	Infusion Rate
2 mg/hr	10 mL/hr
3 mg/hr	15 mL/hr
4 mg/hr	20 mL/hr
5 mg/hr	25 mL/hr
6 mg/hr	30 mL/hr
7 mg/hr	35 mL/hr
8 mg/hr	40 mL/hr
9 mg/hr	45 mL/hr
10 mg/hr	50 mL/hr

10. **If RSI fails; use other methods of airway management such as King Airway, Transtracheal needle, Cricothyrotomy, or Tracheotomy.**