

Orotracheal Intubation

Medical Directive

An Advanced Care Paramedic may provide the treatment prescribed in this Medical Directive if authorized.

Indications

Need for ventilatory assistance or airway control;

AND

Other airway management is ineffective.

Conditions

lidocaine spray		Orotracheal Intubation	
Age	N/A	Age	N/A
LOA	N/A	LOA	N/A
HR	N/A	HR	N/A
RR	N/A	RR	N/A
SBP	N/A	SBP	N/A
Other	Orotracheal Intubation	Other	N/A

Contraindications

lidocaine spray	Orotracheal Intubation
Allergy or sensitivity to lidocaine	Age < 50 years AND
Unresponsive patient	current episode of asthma exacerbation AND
	not in or near cardiac arrest.

Treatment

Consider topical lidocaine spray (to the hypopharynx) for orotracheal intubation when GCS is ≥ 4

Route

TOP

Dose	10 mg/spray
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Max. dose	5 mg/kg
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Dosing interval	N/A
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Max. # of doses	20
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Consider orotracheal intubation

With or without intubation facilitation devices. The maximum number of intubation attempts is 2.

Confirm orotracheal tube placement	
Method	Method
<i>Primary</i>	<i>Secondary</i>
ETCO ₂ (Waveform capnography)	ETCO ₂ (Non-waveform device)
	Visualization
	Auscultation
	Chest rise
	Esophageal detection device

Clinical Considerations

An intubation attempt is defined as insertion of the laryngoscope blade into the mouth for the purposes of intubation.

Confirmation of orotracheal intubation must use ETCO₂ (Waveform capnography). If waveform capnography is not available or not working then at least 3 secondary methods must be used. Additional secondary ETT placement confirmation devices may be authorized by the local medical director.

ETT placement must be reconfirmed immediately after every patient movement.