

# Neonatal Intubation Pause

Read aloud before commencing all intubation episodes

## JUSTIFICATION

- What is the reason for intubation?
- Have you informed the parents?

## EQUIPMENT

- Have you sized an appropriate mask and attached a Pedi-cap CO2 detector?
- Neopuff gas flow set between 6 – 8 l/min?
- Oxygen blender set appropriately (same as baby is currently receiving)?
- Is the Neopuff delivering 25/5mmHg (preterm) or 30/5mmHg (term)?
- Is a self-inflating bag available in cot-space?
- Is the suction on, checked and working with catheter attached?
- Have you got a stethoscope?
- Is laryngoscope/video-laryngoscope (VL) working with a bright light?
  - VL can be used for infants who require a size 00 or higher.
- Is an appropriate blade fitted? (Too small a blade may get you into trouble).
- Do you have the correct size ET tube?
  - What length are you inserting to at the lips?
- Have you got equipment required to secure the ET tube?
  - Neofit (prewarmed)/skin prep e.g. Cavilon to protect skin under Neofit
  - Or for smaller babies, ET holder (correct size) with ties attached/Small forceps/Suture and orange needle

## DRUGS AND MONITORING

- Has the cannula been checked and flushed?
- Intubation drugs prescribed? (see box)
- Intubation drugs checked and prepared?
- ECG and SpO<sub>2</sub> monitoring on?

## ENVIRONMENT

- Has thermal stability been ensured?
  - Doors into nursery closed/screens up
  - Baby in plastic bag if <1500g
  - Warm blankets over baby
  - Appropriately sized woollen hat
- Is a ventilator available, checked and working?
- Gastric tube aspirated to empty stomach?

## TEAM

- Is the nursing Team Leader aware of intubation?
- Is the middle grade tier Doctor/ANNP present?
- Does the Consultant need to be aware of this intubation?  
(Avoid multiple attempts without support)
- Clarify team roles:
  - Who is intubating?
  - Who is administering drugs?
  - Who is passing equipment (ETT/Suction)?
  - Who will provide cricoid pressure?

## SAFETY NET

- What is the planned course of action if intubation is not successful ?
- Is everyone happy to proceed?

ASK YOURSELF, DO YOU NEED HELP?

Body wt (kg)	ETT Size (mm)	Length at lips (cm)	Blade size (miller or new VL)	VL	F&P mask size
0.5	2.5	6	00/000		35
0.75	2.5	6.5	0/00		35
1	2.5	7	0/00		42
1.5	2.5	7.5	0/00	S0	42
2	2.5 / 3	8	0/00	S0	42
2.5	3	8.5	1/0	S1/S0	50
3	3 / 3.5	9	1/0	S1/S0	50
3.5	3.5	9.5	1/0	S1/S0	50/60
4	4	10	1/0	S1/S0	50/60

## VIDEO-LARYNGOSCOPE

- Plug in at cot-side if inadequate charge.
- Turn on using power button (bottom left corner of screen).
- Open and attach single-use blade.
- Undertake procedure – asking an assistant to lift upper lip can expand direct view.
- Dispose of blade in clinical waste after procedure.