

SUPRAGLOTTIC AIRWAY- KING LT(S)-D™ Advanced Skill

Student:_____

Examiner:_____

Attempt: 1 2 3

Date:	

□ Successful □ Unsuccessful Examiners signature:_____

			Done	Not Done
1	Determine scene safety and utilize appropriate BSI			
2	Confirm patient is being ventilated with 100% O_2 and has an	oropharyngeal airway in place		*
3	Place patient on pulse oximetry (Examinee need only state)			
4	Choose correct size based on patient's height			*
5	Check integrity of both cuffs (Maximum air fill)			
6	Remove air completely and leave syringe with appropriate a	mount of air attached		
7	Lubricate the distal end and posterior aspect of the tube (Avoid introduction of lubricant near ventilatory opening	js)		*
8	Ensure patient has been pre-ventilated then instruct assistant	nt to stop ventilation		
9	Position the head in a sniffing or slightly extended position (If suspected spinal injury, neutral position is acceptable)			
10	Open patient's mouth and lift jaw with non-dominant hand an	nd remove OP airway with other		
11	With the King LT(S)-D [™] rotated laterally approximately 45°, corner of right side of mouth) introduce tip into mouth and ge tongue. (Do not force tube into position)			*
12	Once tube passes under tongue, rotate tube counterclockwis	se to orient blue line to chin		
13	Gently advance King LT(S)-D [™] until base of connector aligns with teeth or gums			
14	Fully inflate cuffs using maximum volume of syringe included	d in the kit		
15	Attach capnography/capnometry device to end of bag valve device			*
16	Attach bag valve device to King LT(S)-D [™] and begin ventilations while simultaneously withdrawing the airway until ventilation is easy (Large tidal volume, minimal resistance)			
17	Steps 9-14 completed in 30 seconds			*
18	Confirm tube placement: • Chest rise • Bilateral breath sounds • Verification of CO ₂ by capnography/capnometry			*
19	Secure King LT(S)-D [™] using a stabilization device or tape method (Do not cover proximal opening of the gastric access lumen)			*
20	Reassess patient's respiratory status every 5 minutes or when patient's condition changes			*
21	Dispose of contaminated equipment using approved techniq			
Tot	al minimum points needed to pass= 16	Total points awarded		



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Advanced Skill

Shaded areas with asterisk are critical steps. If marked "not done" in any of these areas, the student is automatically marked unsuccessful and must attempt the skill again to assure competency.

Competency Criteria:

- Minimum points awarded and no critical steps omitted
- One successful intubation must be completed- Maximum 2 attempts
- Aseptic technique is maintained throughout procedure
- Patient must be ventilated between attempts

Performance Objectives:

The examinee will demonstrate proficiency in intubating and ventilating a patient with a King LT(S)- D^{TM} .

Condition:

The examinee will be requested to perform an intubation with a King LT(S)-DTM and then ventilate a simulated non-breathing patient lying on the floor. The patient already has had two unsuccessful endotracheal intubation attempts. The instructor will provide a height when asked. The patient has an OP airway in place and is being ventilated with 100% O₂. An assistant, knowledgeable in the use of the Bag Valve device, will assist as instructed. Necessary equipment will be adjacent to the manikin.

Equipment:

Adult intubation manikin, various size King LT(S)-D[™] kits, capnographer or capnometer device, silicone spray, water soluble lubricant, suction machine with tubing, rigid and sterile flexible suction catheter, BVM device, oropharyngeal airway, oxygen tank with flow meter and connecting tubing, gloves, goggles, and stethoscope.

Verbal Test Items (optional):

Indications:

• Failed endotracheal intubation and patient is at least four (4) feet tall.

Contraindications:

- Responsive patients with a gag reflex
- Patients with know esophageal disease
- Patients who have ingested caustic substances

Complications:

- Possible intubation of the trachea
- High airway pressures can divert air into stomach

Note:

- King LT(S)-D[™] is a salvage airway and should only be used when endotracheal intubation is not successful
- Only water based lubricant should be used
- Device is not proven to protect airway from the effects of regurgitation and aspiration
- Size 3 for 4 feet, Size 4 for 5 feet and Size 5 for 6 feet or larger

Comments: