

# B@EASE Rapid Sequence Induction Checklist

## B @ E A S E

### B R I E F

#### Equipment

##### Airway Equipment

- Oxygen / Guedel / NP airway
- Bag Valve Mask & Circuit
  - o (Waters or Ayres T-piece)
- etCO2 attached to HME/Catheter Mt.
  - o (Use during preoxygenation)
- 2 working laryngoscopes & alternate
  - o (McCoy or straight blade)
- Tubes (2 Adults, 3 Paeds)
- Suction on
- Lubricating Jelly/ Bougie/ Stylet Syringe/ Tube fixation
  - o (Tie/tape)

##### Drugs

- Induction, paralysis & emergency drugs drawn up
- Infusions ready
  - o (Sedation/Inotropes)

##### Monitoring equipment

- etCO2 – waveform seen
- BP – Cycling
- ECG
- SPO2



#### Airway/Anaesthesia

##### Physiology optimised

- IV access Location(s)
- Fluid running
- Airway Assessed

##### Positioned Appropriately

- Bed tips and height adjusted
- Manual In-line Stabilisation Required ?
- Ear to sternal notch in horizontal alignment

##### Pharmacology Plan

- Drugs checked and labelled
- Verbalise planned Drug doses
- Verbalise **Plan A** for intubation

**Difficult airway trolley**

**Defibrillator location**

#### Staff

*Allocate roles e.g.*

**Team leader**

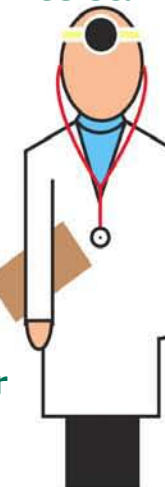
**Intubator (1<sup>st</sup>/2<sup>nd</sup>)**

**Airway Assistant**

**Cricoid**

**Drugs**

**Runner**



#### Emergency Plan



**Anticipated difficulty?  
Verbalise failed ventilation/ intubation plan as below**

**Plan B**(if appropriate)  
Supraglottic Airway e.g. LMA

**Plan C**  
Revert to facemask / adjuncts to ventilate and OXYGENATE  
Consider other techniques  
e.g fiberoptic scope/  
videolaryngoscope

**Plan D**  
Rescue techniques e.g.  
Cricothyroidotomy  
(ENT surgeon?)

##### Post intubation plan

- Ventilator set up checked
- Infusions connected
- CXR Requested
- Gastric tube required?

Further help available from Bleeps :

# How to use the B@EASE Rapid Sequence Checklist



## Step ONE: Quick Team Brief at decision to RSI

- Use the checklist initially as an aide-memoire to organise equipment and prepare the patient
- Minimum of 3 people
- Remember TEAM INTRODUCTIONS and if you anticipate difficulty call Senior Anaesthetist early

## Step TWO: Checklist prior to drug administration

When everything is ready, and the patient is being pre-oxygenated, the Team Leader reads the whole checklist out just prior to drug administration  
Each tick box requires an answer, either Yes/No or a brief comment

- E.g. Q - "2 working Laryngoscopes"  
A - "Yes"  
Q - "Manual In-line Stabilisation Required"  
A - "Not required"  
Q - "Verbalise Drug Doses"  
A - "375mg Thiopentone, 100mg Sux"  
Q - "Intubator (1st/2nd)"  
A - "Dr X / Dr Y"

## Step THREE

After the RSI, consider a team debrief

