

Date:		Unit:	
Nurse/ Doctor assessed:			
Non-Compliant:	<80% compliance		
Compliant:	80-100% Compliance		

Equipment required:		
1. Resus. Mannequin	2. ET tubes (from unit)	3. Zinc oxide tape
4. Extra thin hydrocolloid dressing	5. Hand spray	6. Skin prep wipe /TBCo
7. Resus device	8. Suction catheters	9. Ventilator and circuit
10. Magills forceps	11. Introducer	

Scenario
State: "You are nursing a 6 month baby with presumed pneumonia. The baby was not coping on high flow oxygen via a non rebreathing mask and required bagging. The baby's saturations drop if the bagging stops. Together with the doctor you decide that the baby requires intubation and ventilation. Please prepare for and assist the doctor with this procedure."

NO.	INDICATOR	NC	C	Comment
1.	Communicates with mother			
2.	Identifies baby-checks ID band information			
Prepares equipment and baby				
3.	Washes hands			
4.	Plugs in clean ventilator			
5.	Attaches circuit correctly and fills humidifier with sterile water			
6.	Sets oxygen to 50% Pressures 20/5 and rate 60bpm <i>(Prompt if required-"What settings would you use?")</i>			
7.	Indicates that baby should receive sedation with morphine and midazolam			
8.	Checks resus device correctly			
9.	Attaches oxygen tubing			
10.	Checks laryngoscope			
11.	Checks suction and prepares 6FG catheter			
12.	Prepares mucous extractor			
13.	Prepares size 3.5 ETT with KY Jelly, maintaining sterility			
14.	Prepares appropriate Zinc oxide tape strips (approx 1cm width)			
15.	Positions baby flat with head to side /foot of bed			
16.	Ensures adequate light			

State: "Please describe how you would assist the doctor during intubation?"

Assists with Intubation				
17.	Sprays hands			
18.	Monitors heart rate & saturations and advises MO			
19.	When requested passes Magills forceps-handles towards doctor- or introducer			
20.	When requested passes ETT to MO maintaining sterility			
21.	Provides suction as required			
22.	Administers free flow oxygen			
23.	Attaches resus device once intubated			
24.	Assists MO with stethoscope to listen for air entry			

State: "The baby has been successfully intubated. Please strap the ET tube securely at 8cm."

Secures ET tube and stabilizes baby				
25.	Prepares skin with skin prep wipe or TBCo			
26.	Applies extra thin hydrocolloid dressing beneath tape			
27.	Secures ETT tube correctly (according to unit protocol)at 8cm			
28.	Ensures nostrils are visible and pink			
29.	Ensures tape does not adhere to hair or skin not protected by hydrocolloid			
30.	Passes and secures NG tube to cheek and records the date			
A. Totals				

Secures ET tube and stabilizes baby continued.		NC	C	Comment
31.	Takes ET aspirate for MC&S using mucous extractor			
32.	Attaches vent. circuit and commences ventilation as ordered			
33.	Observes for chest movement			
34.	Monitors saturations			
<i>State: "The baby's saturations are 92% with good chest movement. What would you do now?"</i>				
Ongoing care				
35.	Positions/Contains baby with neck in neutral position-limbs flexed and in midline position			
36.	States a chest X-Ray should be done to confirm tube position			
37.	Records procedure in record noting size & depth of ETT			
38.	Communicates with and reassures mother			
Knowledge Check				
<i>State: "Please tell me what the correct position of the ETT should be?"</i>				
39.	Above the carina at T2-3			
<i>State: "Please tell me what inspired tidal volume does your baby require?"</i>				
40.	4-6mls/kg			
<i>State: "Please tell me what do PIP, PEEP and MAP stand for?"</i>				
41.	PIP =Peak Inspiratory Pressure; PEEP=Positive End Expiratory Pressure ; MAP= Mean Airway Pressure			
<i>State: "What are you aiming to achieve with ventilation?"</i>				
42.	Improved oxygenation and CO ₂ elimination			
B. Totals				
A. Totals brought forwards				
Combined Totals				
Compliant total / 42				
Final Percentage		X100 =		%

In Discussion with the Individual:	
Gaps Identified:	
Action Plan:	

Assessed by:			
Sign:		Print:	
		Desig:	