

BEFORE PATIENT ARRIVES

INSIDE THEATRE (WEAR PPE)

PREPARE

Anaesthetic Pre-op Assessment

Prepare Airway Equipment

- Check Machine
- Working Laryngoscope (*VL if available*)
- ET Tubes, Syringe, Stylet, Tie/Tape
- Adjuncts e.g. Bougie, LMA, Oral airway
- Working Suction + Suction Catheter
- Breathing Circuit + Viral filter + Facemask
- Consider Tube Clamp & Aerosol Barrier

Prepare Drugs

- Induction Agent
- NM Blockade (+ Reversal +/- Stimulator)
- Emergency drugs e.g. Atropine, Adrenaline
- Analgesics / Antiemetics
- Antibiotics
- Other drugs as relevant
- IV Cannulas, Fluids (+ Pumps), Blood

Additional Items

e.g. Pen/documents, Dedicated waste bag

PLAN

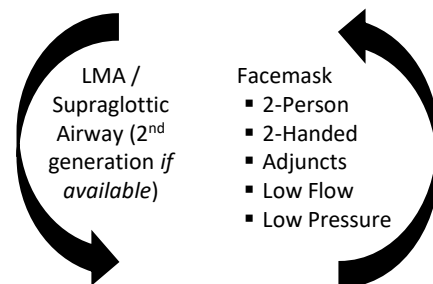
Anaesthesia Team Briefing

- Confirm team roles
- Discuss & confirm need for intubation and anaesthetic plan

Intubation Plan

Plan A: RSI or Modified RSI

Plan B/C: Mask ventilation or LMA



Plan D: Rescue - FONA

- Team members apply PPE**
 - Gown, Hat, Eye Protection, N95/FFP mask, gloves (anaesthesia provider double glove for airway management)
- Non-essential personnel leave**
- Patient transferred to theatre wearing surgical mask**

INTUBATION

- Essential personnel only
- Apply patient monitoring
- Optimise patient position
- Optimise patient condition
- Set-up any barrier methods
- Team confirm anaesthetic plan
- Pre-oxygenate >3 mins, low flows
- Proceed with RSI / Modified RSI
- Minimise Aerosolization
 - Avoid BVM ventilation during apnoeic period unless hypoxia
 - Inflate cuff before ventilating
 - Secure tube & all connections
 - Avoid unnecessary disconnections
 - Consider clamping ETT after insertion until ventilator attached
- Confirm ETT placement with capnography (*if available*) or resource appropriate methods
- Ensure patient condition stable
- Proceed with surgery

EXTUBATION

- Ensure patient condition stable
- No non-essential personnel in OR
- Perform suction prior to extubation
 - Avoid excessive or over-suctioning
 - Consider in-line suction *if available*
- Extubate on OR table
 - Avoid unnecessary disconnections
 - Keep any aerosol barrier in place
- Extubate when indicated
 - Minimize coughing at extubation
 - Apply oxygen mask or facemask when extubated
- Arrange transfer when indicated
- No entry to OR without PPE until designated time post-extubation (according to OR ventilation)
- Remove PPE in designated area