Paediatric Rapid Sequence Induction Checklist

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Equipment	Suction: working, Yankeur under right side of pillow				
	Ambu-bag, 15l/min O ₂ , PEEP valve				
	ETT: correct size, cut appropriately, lubricated, (cuff checked).				
	ETT: one size smaller in packet on trolley top				
	Two working laryngoscopes with blades				
	10ml syringe (if ETT cuffed)				
	Tube tie				
	Gum Elastic bougie on trolley top				
	Oropharyngeal airway on trolley top				
	Capnograph set up and function confirmed				
	Stethoscope				
	Ventilator checks complete				
	Alternate oxygen source (cylinder / flow meter)				
	Appropriate LMA in packet on trolley top with 50 ml syringe				
Drugs	IV / IO access patent and accessible				
	Hypnotic: confirm syringe, drug, dose and volume to be injected				
	Opiate: confirm syringe, drug, dose and volume to be injected				
	Muscle relaxant: confirm syringe, drug, dose and volume to be injected				
	Atropine: confirm syringe, dose and heart rate decision point				
	Sedative infusion: confirm drug, dilution and starting infusion rate				
Team Roles	Doctor 1. Airway				
	Doctor 2. Drugs				
	Nurse 1. Assistant (at airway trolley)				
	Nurse 2. Cricoid pressure (line of sight to monitor)				
	Nurse 3. Manual in line control of cervical spine (if required)				
	Verbally rehearse failed airway plan				

Intensive Care Unit, Royal Alexandra Hospital

Paediatric RSI drug worksheet							
Name:			Weight:				
			Known	E	Estimated		
		De	ose	Dilution	Volume to be injected		
Induction Agent							
Opiate							
Suxamethonium	2 mg/kg						
Muscle Relaxant							
Atropine	20 μg/kg						
Glycopyrronium	10 μg/kg						
Adrenaline (Anaphylaxis, IV)	1μg/kg						
Adrenaline (Cardiac Arrest)	10 μg/kg						
Sedative Infusion							
Fluid Bolus	20ml/kg						

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