## **TECHNIQUE FOR RAPID SEQUENCE INDUCTION**

- $\circ$  get ready for a surgical airway just in case
- o get the sucker ready
- o get the ventilator ready
- o get the tube ready check that the cuff inflates
- o get the laryngoscope ready check that the lightbulb works
- preoxygenate with 100% oxygen
- Apply cricoid pressure
- Sedate with whatever is handy:
  - THIOPENTONE 1-5mg/kg, so ~300mg will usually do
  - Duration is 5-10 minutes
  - Thiopentone will drop the blood pressure. If this is bad, you may use fentanyl instead, because it has very little effect on blood pressure. In a totally comatose patient, you may consider not sedating at all.
- Paralyse with whatever is handy:
  - SUX 1-2mg/kg, so about 100 mg
  - Duration is 5 minutes or so
  - Or: ROCURONIUM 1mg/kg, so about 70-80mg
  - Duration is 30 minutes! You better get the tube in.
  - We use roc because it has the most rapid onset, 1-2 minutes, and has a minor effect on heart rate.
  - $\circ$   $\,$  Vecuronium has no cardiac effects but the onset time is 2-4  $\,$  minutes.
  - We don't use pancuronium because it causes tachycardia and hypertension
- INTUBATE when they relax
- Inflate the cuff and auscultate
- Relax cricoid pressure and ventilate
- Check for CO2 exhalation with a colorimetric capnographer