

Anaesthesia for emergencies

Emergency Anaesthesia Pre-procedure checklist

Prepare team

Team leader
Intubator
Assistant capable of performing cricoid pressure
Manual in-line stabilisation if trauma
Drugs / volume
Finger on the pulse

Equipment

Self inflating bag or Ayers t-piece
Appropriate mask/Guedel airway
Suction and yankeur Laryngoscope x 2 and blades
Bougie /Stylet
ETT tubes
ETT tapes
Oro/nasogastric tube
Stethoscope

Drugs

Fluid boluses
Resuscitation drugs
Induction agent
Muscle relaxants
Sedative infusions

Patient and Monitoring

Pre-oxygenate
Optimal position
Patient adequately resuscitated
2 lines IVI / IO
ECG
BP monitoring
ETCO2

Induction Agent

Ketamine 0.5 – 2 mg/kg



Muscle Relaxant

Rocuronium 1mg/kg



Continued sedation

Morphine 20 – 80 mcg/kg/hr

AND

Midazolam 20 – 80 mcg/kg/hr

OR

Propofol 2 – 4 mg/kg/hr

Propofol is used for children expected to be woken from anaesthesia within 6 hours



Continued muscle relaxation

Rocuronium boluses 1mg/kg



Anticipate difficulties

Verbalise failed intubation drill
Difficult airway trolley available

Specific Conditions	Induction agent	Muscle relaxant
Sepsis	Ketamine	Rocuronium
Head injury	Ketamine	Rocuronium
Status Epilepticus	Thiopentone	Rocuronium
Upper airway obstruction	Sevoflurane	Consider (see MAST)
Asthma	Ketamine	Rocuronium
CHD/Cardiomyopathy	Ketamine	Rocuronium