

Criteria: Any time an ALS Provider *attempts* an advanced airway procedure (e.g., intubation, supraglottic airway, or cricothyrotomy/surgical airway), regardless of success.

The definition of an attempt is:

- a) Anytime a laryngoscope or airway device touches the patient's oropharynx/airway or
- b) Anytime paralytics are administered in a non-intubated patient.

For Procedures performed in Skagit County:

NOTE: Procedures performed as member performing active duty for a Skagit County EMS Agency and operating under Skagit County EMS Protocols are considered as performed in Skagit County regardless of actual geographic location. In other words, a procedure performed by a Skagit EMS Agency during an out-of-county transfer would be documented as described below.

1. Procedure performed in the FIELD (not including the emergency department):
 - A. Document in PCR.
 - i. Provider should be appropriately listed for each attempt performed.
 - ii. Success or failure of each attempt should be clearly documented.
 - iii. Adjunctive medications should be appropriately documented.
 - iv. Size of equipment and depth inserted should be appropriately documented.
 - v. Verification of proper placement, **including documented end-tidal CO₂** should be documented.
 - B. If procedure was done with video laryngoscopy, complete the **Post Intubation with Video Laryngoscopy QA/QI Form** and send video file to EMS Office for QI review
 - C. Complete an **EMS Online Airway Report** within **24 hours** of the procedure.
 - i. If multiple providers involved, the final provider to attempt an airway procedure should complete the EMS Online Airway report. This provider obtain the information regarding any previous attempts and include it in the airway report.
 - ii. Include the incident # in the EMS Online report.
 - iii. **NOTE: For providers with a primary EMS agency outside of Skagit County** (i.e., part-time providers in Skagit County): Email a copy of the EMS Online Airway Report to the MPD (**skagitmpd@icloud.com**) as EMS Online does not reliably auto-submit the report information to the MPD in that setting.
 - D. **Sentinel Events:** Notify the MPD directly (**skagitmpd@icloud.com**) within **24 hours** under the following circumstances:
 - i. Anytime attempts to intubate a patient are made but are not ultimately successful.
 - ii. Anytime a surgical airway, needle cricothyrotomy, or trans-tracheal jet ventilation is attempted or performed.
 - iii. Anytime there is a concern for a delayed recognition of an esophageal intubation.
 - iv. Anytime there is an equipment failure or concern during an airway procedure.

- v. Notification to the MPD should consist of a email to the MPD, even if phone or direct notification are also performed.
 - Email subject line should be: QI: Sentinel Event
 - Email content should be: EMS Agency and Incident number
 - NO OTHER INFORMATION IS EXPECTED OR REQUIRED. DO NOT INCLUDE PROTECTED OR CONFIDENTIAL INFORMATION.
 - Phone notifications are welcome but not required.
2. Procedure performed in the EMERGENCY DEPARTMENT or OPERATING ROOM (OR):
 - A. Unless procedure occurs during transition report to ED staff, do not document in PCR.
 - B. Do not complete an EMS Online Airway Report
 - C. Complete an **Emergency Department/OR Airway Procedure by EMS Form**.
 - i. Have **Emergency Department/OR Airway Procedure by EMS Form** initialed by ED Provider or Anesthesiologist.
 - ii. Submit copies to (Using smartphone or tablet to scan and create a PDF file is recommended) to:
 - MPD (skagitmpd@icloud.com)
 - County EMS Office (mlbrisson@co.skagit.wa.us)
 - EMS Agency QI representative
 - iii. This form may also be used for non-airway related procedures.

For procedures performed for agencies outside of Skagit County EMS:

NOTE: Procedures performed for an EMS service based outside of Skagit County should be documented using these guidelines. It is recommended by the Skagit MPD that *all* personnel who work in Skagit County EMS but also work for out-of-county agencies document notification airway procedures to the Skagit EMS system. However, notification is **required** for those who seek to use out-of-county procedures for certification or re-certification purposes through Skagit County.

1. A notification of an advanced airway procedure performance should be submitted by the EMS provider who performed the procedure. The notification should include:
 - A. Name of EMS Provider
 - B. Agency for which EMS Provider was functioning at time of procedure
 - C. Name of the MPD for the agency for which the EMS Provider was functioning at the time of procedure.
 - D. Date of procedure
 - E. Name of procedure with indication of success or lack of success.
 - F. Incident # if performed in field/Patient Account # if performed in emergency room or operating room.
 - G. Any supporting documentation (This does **not** include a copy of PCR or any document with privacy protected information, but instead refers to the out-of-county equivalent to the **Emergency Department/OR Airway Procedure by EMS Form**.)

Advanced Airway Documentation Policy (Page 3 of 3)

H. Submit copies to (Using a smartphone or tablet to scan and create a PDF file is recommended) to:

- MPD (skagitmpd@icloud.com)
- County EMS Office (briesland@co.skagit.wa.us)
- Skagit County EMS Agency QI representative

Matthew F. Russell, M.D.
Skagit EMS Medical Program Director

Emergency Department/OR Airway & Procedure by EMS Form

Name of EMS Provider: _____ **Date:** _____

Agency: AeroSkagit Anacortes FD Central Skagit Medic One Mount Vernon FD

Procedure Performed: _____ **Successful:** YES NO

- Orotracheal Intubation
- Supraglottic Airway Placement
- Surgical Airway
- Other: _____

Patient Encounter Number: _____
(K# at Skagit Valley Hospital, F# at Island Hospital, and CSN # at PeaceHealth United General)

Comments by supervising Provider (not required):

Supervising Provider Signature

EMS Provider Signature

NOTE: If supervising provider has any concerns regarding procedure performance please feel free to contact Skagit County EMS Medical Program Director at skagitmpd@icloud.com or (360) 416-1830



Note to EMS Provider - Please submit copies of this form to:

- Skagit County EMS MPD (skagitmpd@icloud.com)
- County EMS Office (briesland@co.skagit.wa.us)
- EMS Agency QI representative.

It is encouraged to scan this form using smartphone or digital scanner (PDF format) to facilitate submission. It is also strongly recommended that the EMS Provider retain a copy themselves.

This document (and any attachment to it) is protected by coordinated quality improvement/peer review confidentiality under RCW 70.41.200/4.24.250/43.70.51