

RSI Scenario 1

Aims

- Experience of the simulation environment
 - Location of equipment
 - Performing an RSI using the B@EASE checklist
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Faculty Brief

Mr Charles Cole is a 46-year-old man who has just been admitted to ICU with a left sided pneumonia.

PMH - Generally fit and well

Medication - Nil

Allergies - Nil

The anaesthetic SpR has brought him up to the unit from the MHDU but has been called to a paediatric trauma in the ED. He is on 100% via a non-rebreathe mask with sats of 91%, GCS 15 and no cardiovascular compromise.

The patient will be intubated with little problems, a slight dip in SaO₂ and a slight increase in HR and B/P during intubation. Capnography readings confirm placement.

The scenario ends when the patient is intubated and the tubes position is confirmed and secured in place

Remember the morning simulation is a straightforward RSI, the feedback should focus on practical issues rather than human factors.

Further information

A - Maintained

B - RR 30, SAO₂ 91%, OXYGEN AT 15LITRES/MINUTE ON NON-REBREATHE MASK, WIDE SPREAD L SIDED CRACKLES

C - HR 70 NSR. B/P 140/90. IV ACCESS AND ART LINE PRESENT.

D - BM 5.2. PEARL. PATIENT RESPONDING TO VOICE BUT PAUSE EVIDENT BEFORE RESPONSE

E - NIL OF NOTE

SAMI

	Initial	During preoxygenation	During intubation	Once successful
SaO2	91%	95%	Slowly drop to 88%	98%
HR	70	70	90	80
B/P	140/90	140/90	110/70	110/70
CO2				5.5KPa

Student Brief

Mr Charles Cole is a 46-year-old man who has just been admitted to ICU with a left sided pneumonia.

PMH - Generally fit and well

Medication - Nil

Allergies - Nil

The anaesthetic SpR has brought him up to the unit from the MHDU but has been called to a paediatric trauma in the ED.

Equipment

- Sim man with iv cannula and art line in situ
- Syringes
- Needles for drawing up
- Drugs or water/ N.saline (depending on the level of fidelity of the Sim man, access to drugs and local protocol)
- ETT x2
- Bougie
- Gel
- Suction
- 10ml syringe
- Scissors
- Face mask
- Waters circuit
- Guedel airways
- Tie
- Monitoring, including capnography
- Copy of B@EASE checklist