

**Difficult airway box is kept in the long store cupboard on NNU**

Failed intubation: **CAN** ventilate  
Prioritise oxygenation

**Obstetric Anaesthetic Bleep 0701**  
ENT consultant via switchboard

Failed intubation: **CAN'T** ventilate

Can't ventilate, can't intubate, worsening hypoxaemia +/- bradycardia

**PLAN A:**  
- Optimise face-mask oxygen delivery  
- Call for senior help (consultant on call)

**PLAN B:**  
- Consultant to re-attempt intubation (MAX number of attempts =3)  
- Maintain oxygenation

**PLAN C:**  
Call anaesthetic support (2222 **Anaesthetic Emergency**) + ENT consultant – via switch

**PLAN D:**  
- Rescue techniques (only to be used in life threatening situations)  
- ENT support

Oxygenate and ventilate

- 3 P's (position, pressure and pull); face-mask seal' head position, jaw thrust (2 person if appropriate)
- Consider oropharyngeal airway/nasopharyngeal airway
- Consider suction
- *If elective intubation & baby has received pre-intubation medication, allow muscle relaxant to wear off and allow baby to breathe spontaneously*
- *Babies with significant micrognathia may achieve better tidal volumes prone*

Plan further attempt at direct laryngoscopy carefully

- Use of NGT to decompress stomach
- Use of appropriate cricoid pressure to improve view
- Repeat pre-intubation medication if appropriate
- Extreme pre-terms needing size 2 ETT – cool in fridge first to stiffen
- **Use of video laryngoscope**
- **Consider calling 2<sup>nd</sup> paediatric consultant**

Insert Laryngeal Mask Airway/I-Gel (size 1)  
Consider increased ventilation pressures

With anaesthetic support consider re-intubation using

- Bougie
- Magill's forceps

Percutaneous tracheal puncture with 14G/16G jet ventilation cannula connected to 3-way tap and green oxygen tubing.

With ENT support consider emergency tracheostomy

Adapted from Advanced Resuscitation of the Newborn Infant (Resuscitation Council) – Management of the Difficult Neonatal Intubation Scenario

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This is the most current document and should be used until a revised version is in place