Student Name:					
	dical School: Year:		г _		T_
please show how you was I will ask some question	omised airway has been admitted to the emergency department, vill manage their airway has before and during the procedure.	Self	Peer	Peer/ Tutor	Tutor
Demonstrates safe approach and use of standard precautions	Use of standard precautions, i.e. gloves, apron Awareness of clinical hazards				
Which patients are at risk of airway compromise	Unconscious Impaired consciousness Heavily sedated Anaesthetised				
Explains how to perform initial airway assessment	Speaks to patient to assess for response and airway compromise Demonstrates Look, Listen and Feel technique – look for misting of O2 mask, use of accessory muscles, rise and fall of chest, paradoxical breathing, position of patient, tracheal deviation				
Explain what sounds are heard in partial obstruction and complete obstruction	Partial = noisy breathing, snoring, gurgling, periods of apnoea followed by hyperventilation or all of these Complete = (unless treated) will lead to hypoxia within 1 or 2 minutes with bradycardia and death a few minutes later				
Describes the anatomy of the airway	naso-pharynx – oropharynx – laryngopharynx – larynx				
Consent issues Explanation to patient including possible complications	Explains any planned intervention correctly to a conscious, semi-conscious or unconscious patient Explains the ethical issues concerning consent in an unconscious patient – act in patients best interest Discusses any possible complications such as Invoking gag reflex, inducing vomiting, causing trauma to soft tissues,				
Should you administer oxygen therapy?	If the airway is compromised in any way always add oxygen if it is possible to do so.				
Prepares equipment	Ensures all airway equipment is ready for use Demonstrates what checks need to be undertaken prior to the use of airway equipment - intact, gas flow, reservoir bag fills, pressure relief valve works when occluded if present. Suction equipment should be ready for use				
Demonstrates technical ability –	Demonstrates airway opening manoeuvres - head tilt- chin lift and jaw thrust, explains when each manoeuvre should be used - Jaw thrust in suspected 'C' spine injury				
	Re assessment of airway and ventilation following this to confirm air entry or further intervention indicated Suction				
	Knows indication for and demonstrates use of a wide bore rigid sucker (Yankeur) – by direct vision only, down the sides, gently, suction on removal. Knows indication for and demonstrates use of fine bore flexible suction catheter – used in conjunction with a naso-pharyngeal tube when oral access is not possible				

	De secondard of single and contiletion fellowing this					-
	Re assessment of airway and ventilation following this					
	Oropharyngeal airway Discusses indications and contraindications - consciousness, oral trauma					
	Demonstrates correct technique for sizing the device –					
	Measures from angle of mandible to centre of incisors					
	or gums – or vertically level with incisors or gums Demonstrates correct insertion technique – inserts					
	upside down and then rotates through 180 degrees					
	Re assessment of airway and ventilation following this					
	Nasopharyngeal airway					
	Discusses indications and contraindications = # base					
	of skull, # mid-third of face, nasal polyps, deviated septum, coagulopathy					
	Demonstrates correct technique for sizing device –					
	size 6 for an adult female or small male, size 7 for an					
	adult male or large female					
	Demonstrates correct insertion technique					
	Re assessment of airway and ventilation following this					
Post-procedure management	Waste disposal in accordance with Trust guidelines Washes hands					
management	Thanks patient					
	Seeks help if needed.					
Professionalism	Communicates to team members					
	Thanks staff					
Overall ability to	Assess globally, would you be happy for this student to					1
perform procedure	be supervised to perform basic airway management					
Self-assessed as at least borderline:	Signature: Date:					
Peer-assessed ready for tutor assessment:	Signature: Date:					
Tutor assessed as satisfactory:	Signature: Date:					
Notes	•	•	•	•	•	

F = Fail B = Borderline P = Pass G = Good E= Excellent

AC1 Basic Airway Management T-DOCS Revised by Clinical education Tutors June 2023