



Pearls:

- **For this protocol, pediatric is defined as less than 12 years.**
- **Capnometry, Esophageal Bulb, or capnography is mandatory with all methods of intubation. Document results.**
- **Limit intubation attempts to 3 per patient.**
- If unable to intubate, continue BVM ventilations, transport rapidly, and **notify receiving hospital early.**
- Maintain C-spine immobilization for patients with suspected spinal injury.
- Do not assume hyperventilation is psychogenic -- use oxygen, not a paper bag.
- Sellick's maneuver should be used to assist with difficult intubations.
- Nasogastric tube placement should be considered in all intubated patients.
- Continuous pulse oximetry should be utilized in all patients with an inadequate respiratory function.
- Consider c-collar to maintain ETT placement for all intubated patients (REMOVE COLLAR upon patient TRANSFER).