

DUAL LUMEN AIRWAY DEVICE (COMBITUBE®)

Candidate: \_\_\_\_\_ Examiner: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

NOTE: If candidate elects to initially ventilate with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by “\*\*\*” so long as first ventilation is delivered within 30 seconds.

	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct [oropharyngeal or nasopharyngeal airway]	1	
<b>NOTE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct</b>		
**Ventilates patient immediately with bag-valve-mask device unattached to oxygen	1	
**Hyperventilates patient with room air	1	
<b>NOTE: Examiner now informs candidate that ventilation is being performed without difficulty</b>		
Attaches oxygen reservoir to bag-valve-mask device and connects to high flow oxygen regulator [12-15 L/minute]	1	
Ventilates patient at a rate of 10-12/minute with appropriate volumes	1	
<b>NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present and equal bilaterally and medical control has ordered insertion of a dual lumen airway. The examiner must now take over ventilation.</b>		
Directs assistant to pre-oxygenate patient	1	
Checks/prepares airway device	1	
Lubricates distal tip of the device [may be verbalized]	1	
<b>NOTE: Examiner to remove OPA and move out of the way when candidate is prepared to insert device</b>		
Positions head properly	1	
Performs a tongue-jaw lift	1	
Inserts combitube in mid-line and to depth so printed ring is at level of teeth	1	
Inflates pharyngeal cuff with proper volume and removes syringe		
Inflates distal cuff with proper volume and removes syringe	1	
Attaches/directs attachment of BVM to the first [esophageal placement] lumen and ventilates	1	
Confirms placement and ventilation through correct lumen by observing chest rise, auscultation over the epigastrium, and bilaterally over each lung	1	
<b>NOTE: The examiner states, “You do not see rise and fall of the chest and you only hear sounds over the epigastrium.”</b>		
Attaches/directs attachment of BVM to the second [endotracheal placement] lumen and ventilates	1	
Confirms placement and ventilation through correct lumen by observing chest rise, auscultation over the epigastrium, and bilaterally over each lung	1	
<b>NOTE: The examiner confirms adequate chest rise, absent sounds over the epigastrium, and equal bilateral breath sounds.</b>		
Secures device or confirms that the device remains properly secured	1	
<b>TOTAL</b>	<b>20</b>	

CRITICAL CRITERIA

- \_\_\_\_\_ Failure to initiate ventilations within 30 seconds after taking body substance isolation precautions or interrupts ventilations for greater than 30 seconds at any time
- \_\_\_\_\_ Failure to take or verbalize body substance isolation precautions
- \_\_\_\_\_ Failure to voice and ultimately provide high oxygen concentrations [at least 85%]
- \_\_\_\_\_ Failure to ventilate patient at a rate of 10-12/minute
- \_\_\_\_\_ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- \_\_\_\_\_ Failure to pre-oxygenate patient prior to insertion of the dual lumen airway device
- \_\_\_\_\_ Failure to insert the dual lumen airway device at a proper depth or at either proper place within 3 attempts
- \_\_\_\_\_ Failure to inflate both cuffs properly
- \_\_\_\_\_ **Combitube** - failure to remove the syringe immediately after inflation of each cuff
- \_\_\_\_\_ Failure to confirm that the proper lumen of the device is being ventilated by observing chest rise, auscultation over the epigastrium, and bilaterally over each lung
- \_\_\_\_\_ Inserts any adjunct in a manner dangerous to patient