The Royal College of Anaesthetists

The Royal College of Emergency Medicine

Emergency Airway Management

A joint position statement from the Royal College of Emergency Medicine and the Royal College of Anaesthetists

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Building on the report of the 4th National Audit Project of the Royal College of Anaesthetists and the Difficult Airway Society on major airway complications (2011),[†] which made several recommendations, the Royal College of Emergency Medicine and the Royal College of Anaesthetists recommend the following:

ENVIRONMENT

In the Emergency Department (ED) patients with airway emergencies are initially managed in the resuscitation room.

Waveform capnography is always used **(i)** during intubation **(ii)** in patients who remain intubated **(iii)** during transfer of intubated patients.

Rescue airway devices are immediately available and standardised within the hospital.

All equipment is properly maintained and serviced regularly.

PERSONNEL

EDs should at all times have immediate availability of staff trained and skilled in rapid sequence induction and tracheal intubation and assistants skilled in assistance of such.

PROCESS

A checklist is used before intubation in the ED. This should identify appropriate preparation of the patient, the correct range of equipment and drugs, suitable team members for each role and plans for management of failure and complications.

CLINICAL GOVERNANCE

Designated leads from the ED and the Department of Anaesthesia/Intensive care should agree plans for the management of all common and predictable airway emergencies.

ED and the Department of Anaesthesia/Intensive Care should have formal processes to enable interdepartmental training, case discussion and quality improvement. Annual meetings should be a minimum.

TRAINING AND SKILLS MAINTENANCE

The formal induction of all anaesthetists who may attend the ED resuscitation room should include an inspection of its facilities.

Opportunities for the maintenance of rapid sequence induction and tracheal intubation skills by emergency physicians should be provided within each acute hospital.

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[†]Major complications of airway management in the UK. The 4th National Audit Project (NAP4). Report and findings. RCoA, London 2011.