

Pediatric Oral Endotracheal Intubation (April 2013)

<p>Item:</p> <p>Oral endotracheal intubation in a patient of 14 years of age or younger when all other attempts to ventilate have been unsuccessful.</p>
<p>Classification:</p> <ul style="list-style-type: none"> • Advanced Life Support procedure • Not specified in Basic Scope of Practice • May be approved as Local Optional Skill
<p>Use and Level:</p> <ul style="list-style-type: none"> • Not authorized for EMT or AEMT • Authorized for Paramedic <u>only</u> if approved as a Local Optional Skill
<p>Authority:</p> <ul style="list-style-type: none"> • Section 100145(c)(2)(A) of the Paramedic Regulations, Chapter 4, Division 9, Title 22, California Code of Regulations allows a Paramedic to perform or monitor procedures that are not named as part of Basic Scope of Practice. A Local Optional Skill must be deemed appropriate for paramedic use by the medical director of the local EMS Authority and has been approved by the Director of the Emergency Medical Services Authority. A paramedic must be trained and tested to demonstrate competence in performing the additional procedure.
<p>Training:</p> <p>As specified by local EMS Authority and Director of Emergency Medical Services Authority. .</p>
<p>Equipment:</p> <ul style="list-style-type: none"> • No suggestions/recommendations
<p>Medical Direction:</p> <p>Used in accordance with a protocol written and approved by the local EMS agency medical director (HS 1797.220).</p>
<p>Considerations and Recommendations:</p> <p>There is little evidence supporting that pediatric oral intubation is more effective than properly performed BVM ventilations.</p>