

PEDIATRIC INTUBATION

Premed- Atropine .02mg/kg if <1 or bradycardic or <5 if receiving Succ

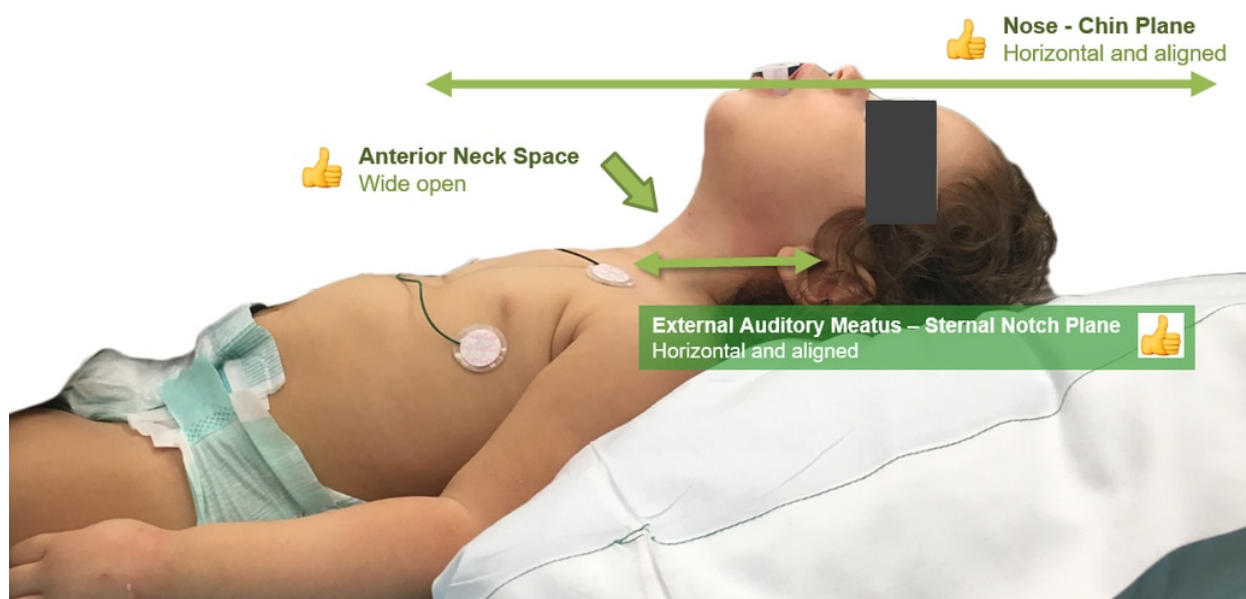
Induction Agent- Ketamine 1mg/kg first line but can use Etomidate .3mg/kg if elev ICP + htn

Paralytic- Rocuronium 1mg/kg or Succinylcholine 2mg/kg (avoid with neuromusc dz, rhabdo)

PEDIATRIC NORMAL PARAMETERS AND EQUIPMENT

AGE	WEIGHT (KG)	ETT ID (mm) UNCUFFED	ETT ID (mm) MICROCUFF	ETT @ LIPS	LARYNGOSCOPE BLADE	LMA	Oral Airway	RR	HR	MAP
Neonate	<1	2-2.5		7	Miller 0			<60	140-160s	30s
Neonate	1-2	2.5-3.0		8	Miller 0	1	4	<60	140s	30s
Neonate	2-3	3.0	3.0	9	Miller 0 / Miller 1	1	4	<60	130-140s	30s
Neonate	>3	3.5	3.0	10	Miller 1	1	5	<60	130-140s	40s
1-6 months	4-6	3.5-4.0	3.0	11	Miller 1	1.5	5	24-30	130s	40s
6 mo – 1 yr	6-10	3.5-4.0	3.5	12	Miller 1 – Wis 1	1.5	6	22-26	130s	50s
1-2 yr	10-12	4.0	3.5-4.0	13	Wis 1	2	6	20-24	120s	50s
2-4 yr	12-16	4.5	4.5	14	Wis 1 – Wis 1.5	2	6	18-22	110s	60s
4-6 yr	16-20	4.5-5.0	4.5-5.0	15	Wis 1 – Mac 2	2.5	6-7	16-20	90-110	60s
6-8 yr	20-30	5.0-5.5	5.0	16	Mac 2	2.5	7	16-20	90s	70s
9-12 yr	30-45		5.5-6.0	17	Miller 2 / Mac 2 / Mac 3	3	7	12-18	80s	70-80s
>14 yr	>50		6.0-7.0	18-20	Miller 2 / Mac 3	3-4	8	10-16	70s	70-80s

Using a pillow to position a toddler into optimal “sniffing position”



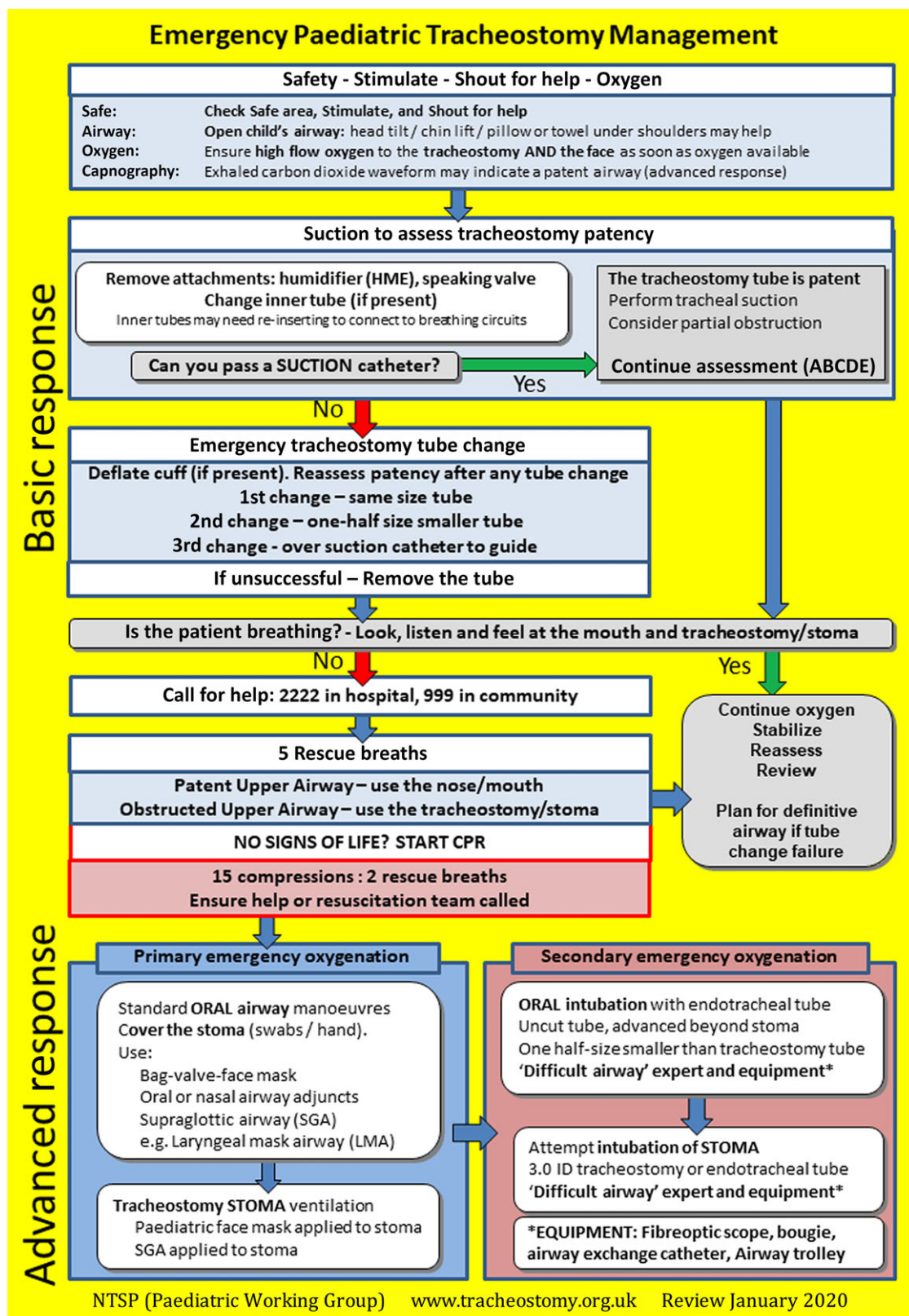


Figure 4 National tracheostomy safety project emergency paediatric tracheostomy emergency management algorithm.