

Emergency Action Card

Post-intubation Hypoxia

State out loud:

"The patient has developed hypoxia"

Action:

If critical features

Complete absence of chest wall movement

Loss of CO2 trace

- Connect to bag and 100% oxygen, mount directly on ET tube, do not include filter/catheter mount
- Manually ventilate
- Check for bilateral chest rise

1 Adequate Oxygen Delivery

- Ensure ventilator is set to 100% oxygen

2 Airway

Check:

- Confirm the presence of the capnograph trace. Look at the shape of the wave. A sloped wave may indicate bronchospasm, an early notch in the wave may indicate inadequate paralysis/sedation.
- Check the position of the endotracheal tube and ensure there has not been unrecognised endobronchial migration.

3 Breathing/Circulation

- Check for chest movement/symmetry.
- Consider and treat patient pathology like tension pneumothorax.
- Consider increasing the respiratory rate or PEEP
- Check blood pressure and perfusion state, treat shock.

Check probe attached and no interference from movement/light sources

Potential causes

- Pneumothorax
- Lung injury, aspiration, contusions, pneumonia
- Poor perfusion, low BP, cold digits
- Insufficient ventilation
- Inadequate oxygen delivery
- Bronchospasm
- Secretions