

RSI for the code team

Sim Fridays



RSI

- Emergency intubation in the unplanned setting
 - Where risk of aspiration is present
- Preoxygenate with 100% FiO₂ for 3-5min
 - 70kg healthy male = 8min >90%
 - Severe illness, obese, pregnant = 3min >90%
- Pretreatment = avoid the side effects of RSI
 - 2nd dose of succinylcholine = +/- atropine
 - Asthma/COPD = lidocaine
 - Elevated ICP = lidocaine and fentanyl
 - CV emergency = fentanyl
- Induction agent (sedative) and a paralytic agent
 - Induction: Versed/Etomodate/Propofol/Ketamine
 - Etom = **adrenal supp** = not in **sepsis**, or give steroid following
 - Versed = **myocardial** depression
 - Propofol = **hypotension**
 - Paralytic:
 - Depolarizing NMBA = Succinylcholine
 - Non-Depolarizing NMBA = Rocuronium

Succinylcholine

- Onset 45-60sec, Duration 6-8min
- Bind to the post-synaptic ACh receptors = muscle depolarize = fasciculations = paralysis
 - Depolarization = Calcium/Sodium influx & Potassium efflux from cells
 - Raises serum potassium by 0.5 mg/dL normally = minutes after given
 - Contraindicated in:
 - Receptor upregulation states
 - Neuromuscular injuries/diseases involving denervation
 - >72hrs old
 - MS, ALS, stroke, spinal cord injury
 - Muscular dystrophy
 - Prolonged immobilization/ICU stays
 - Burn over 72 hours old
 - Rhabdomyolysis
 - Significant hyperkalemia
- Metabolite sensitizes muscarinic receptors at Sinus Node = Bradycardia
- Rocuronium = same onset, but lasts 45min+

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