**INDICATIONS**

Patients requiring a secure and patent airway who do not meet the indication for oral tracheal intubation

**PROCEDURE**

1. Explain procedure to patient if conscious
2. Pretreat both nares with **Phenylephrine HCL** 0.25% nasal spray
3. Administer **Cetacaine spray** to the posterior pharynx
4. Lubricate a NP airway with 2% **Lidocaine** gel and insert into the larger nare
5. Choose correct size ET tube. Remove stylet. Attach BAAM whistle. Lubricate tube with 2% Lidocaine gel
6. Position patient in “sniffing” position
7. Remove NP
8. Insert ET tube and intubate patient
9. Inflate cuff and bag ventilate.
10. Confirm position with the following methods (one method needs to be mechanical):

* BAAM whistle sounds
* Absence of epigastric sounds
* Presence of bilateral breath sounds
* Equal chest rise
* Misting or fogging in the ETT
* CO2 detection device

1. Secure the tube. (Consider cervical collar to prevent extubation).
2. Reassess tube placement after each patient movement (may be done with CO2 detection device).
3. If any doubt about proper placement, use direct visualization to confirm.