

What is intubation? How Respiratory Therapists intubate a patient

00:00:00:000 – 00:00:03:003

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
Okay, let's get ready to intubate this patient.

00:00:03:003 – 00:00:04:537

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
Hi. My name's Samantha DaCosta.

00:00:04:537 – 00:00:07:273

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
I'm a charge respiratory therapist here at UH today.

00:00:07:273 – 00:00:11:277

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
I have working with me, Charlize, she's one of our student RTs and Bailey,

00:00:11:277 – 00:00:15:148

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
and they're going to be helping us demonstrate an intubation for you today.

00:00:15:148 – 00:00:18:618

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
We're going to prepare what we like to call "the blade".

Action description: The blade is inserted into the manikin's mouth which provides a view of the manikin's mouth and throat structures.

00:00:18:618 – 00:00:20:553

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We'll insert the blade into the mouth.

Action description: The Glidescope screen shows the inside of the manikin's throat after the blade was inserted.

00:00:20:553 – 00:00:24:124

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Being mindful of your teeth so we don't do any damage.

00:00:24:124 – 00:00:27:627

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And we want to get a good view of your vocal cords.

00:00:27:627 – 00:00:31:064

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Next, we're going to prepare the actual endotracheal tube.

Action description: The endotracheal tube is shown in its packaging.

00:00:31:064 – 00:00:36:369

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The endotracheal tube is a tube that's going to sit between your vocal cords we're going to go ahead and insert the tube

Action description: The endotracheal tube is inserted into the manikin's mouth.

00:00:36:369 – 00:00:41:708

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to the just the beginning of the vocal cords, once we're there, we're going to pull that rigid, stylet out.

Action description: the rigid stylet within the endotracheal tube is removed.

00:00:41:708 – 00:00:44:344

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We don't want anything heard going through the vocal cords.

00:00:44:344 – 00:00:48:882

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We advance the soft tube a couple of centimeters past the entrance of the vocal cords.

Action description: The soft tube is inserted a little further into the manikin's throat and the blade is removed.

00:00:48:882 – 00:00:52:986

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We inflate that little balloon and then we go ahead and attach

Action description: A plastic balloon, the manual resuscitator, is attached to the endotracheal tube.

00:00:52:986 – 00:01:02:195

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our manual resuscitator and we begin breathing for you.

Action description: The manual resuscitator balloon is squeezed to simulate breathing on the manikin.

00:01:02:195 – 00:01:05:298

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Once we're here, we're going to check do we have carbon dioxide?

Action description: Using a stethoscope, the manikin's breathing is monitored.

00:01:05:298 – 00:01:07:667

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Are we confirmed in the correct location?

00:01:07:667 – 00:01:09:069

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We're going to listen over your chest.

00:01:09:069 – 00:01:13:540

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We're going to make sure we hear air entry on both sides, the right and left lung.

00:01:13:540 – 00:01:16:543

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Last but not least, we will throw on a little device.

00:01:16:576 – 00:01:20:713

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And what this does is it helps hold our endotracheal tube

Action description: A device is placed over the manikin's lip and across the cheeks that is designed to hold the endotracheal tube in the correct place.

00:01:20:713 – 00:01:24:217

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in the correct place and so that it does not slip out.

00:01:24:217 – 00:01:26:686

Samantha DaCosta, Charge Respiratory Therapy, University Hospital, LHSC
And we'll get to working to make you feel better.