Skill Sheet

i-gel Extraglottic Airway

Objective: DEMONSTRATE the recommended procedure for insertion of an i-gel extraglottic airway.

References:

PHTLS (Military Version) Eighth Edition, Jones and Bartlett Learning

Evaluation: Students will be evaluated as a Pass/Fail (P/F). The instructor will verify the accuracy of the student's ability to insert an i-gel EGA on an airway trainer by means of observing the student's procedures and technique.

Materials:

Student Checklist Airway Simulator, i-gel and holder, surgical lubricant

Instructor Guidelines:

- 1. Provide each instructor with a Student Checklist.
- 2. Ensure student has all required materials.
- 3. Read the Learning Objective and the evaluation method to the student.
- 4. Explain the grading of the exercise.
- 5. Allow time for the students to extract the information required from the instructorprovided scenario.

Performance Steps:

- 1. Assemble all necessary equipment.
- 2. Verbalize the indications for an i-gel an unconscious patient without significant direct trauma to airway/facial structures.
- 3. Verbalize the primary advantage of the i-gel: no need to fill the cuff with air and no need to monitor cuff pressure after inflation and with altitude changes.
- 4. Verbalize that i-gel size 4 is the correct size for the typical adult. Size 5 is used for adults larger than 200 pounds.
- 5. Assess the upper airway for visible obstruction.
- 6. Lubricate the i-gel with a surgical lubricant using the protective cradle as shown in the video.
- 7. Open the airway with a chin lift/jaw thrust maneuver.
- 8. Open the mouth with a scissor maneuver of the fingers.
- 9. Insert the airway into the mouth with the open side pointing towards the casualty's chin. Insert until you feel resistance.
- 10. Secure the i-gel in place.
- 11. If assisted ventilation is required, attach a bag-valve-mask device to the i-gel port.

- 12. Auscultate both sides of the chest and the epigastrium.
- 13. Ensure that pulse ox monitoring has been established. Also use end-tidal CO2 monitoring if available.
- 14. Document the procedure on a TCCC Casualty Card. (DD Form 1380)

Task	Completed		
Assembled all necessary equipment.	P/F	P/F	P/F
Verbalized the indications for an i-gel – an unconscious patient without significant direct trauma to airway/facial structures.	P/F	P/F	P/F
Verbalize the primary advantage of the i-gel: no need to fill the cuff with air and no need to monitor cuff pressure after inflation and with altitude changes.	P/F	P/F	P/F
Verbalize that i-gel size 4 is the correct size for the typical adult. Size 5 is used for adults larger than 200 pounds.	P/F	P/F	P/F
Assessed the upper airway for visible obstruction.	P/F	P/F	P/F
Lubricated the i-gel with a surgical lubricant.	P/F	P/F	P/F
Opened the airway with a chin lift/jaw thrust maneuver.	P/F	P/F	P/F
Opened the mouth with a scissor maneuver of the fingers.	P/F	P/F	P/F
Insert the airway into the mouth with the open side pointing towards the casualty's chin. Insert until you feel resistance.	P/F	P/F	P/F
Secure the i-gel in place.	P/F	P/F	P/F
If assisted ventilation is required, attach a bag-valve-mask device to the i-gel port.	P/F	P/F	P/F
Auscultate both sides of the chest and the epigastrium.	P/F	P/F	P/F

Insert an i-gel Extraglottic Airway

Critical Criteria:

- _____Did not lubricate the i-gel prior to insertion.
- _____ Did not insert the i-gel with the open portion facing the casualty's chin.
- _____ Did not auscultate both sides of the chest and the epigastrium.
- _____Did not ensure that pulse ox monitoring has been established.
 - _____Did not document the procedure on a TCCC Casualty Card. (DD Form 1380)

Evaluator's Comments:

Student Name:	Date:	
Evaluator:	Pass:	Fail: