	Infrequently Used Skills Verification Checklist **Adult i-gel Airway Device**	**1110-D (1)**

Name:	Date:
Provider Agency:	Evaluator:

Objective: Describe the indications/contraindications for utilization of an adult i-gel airway device and demonstrate the ability to proficiently perform the procedure.

Equipment: Appropriate PPE, adult airway manikin, oropharyngeal airway (OPA), appropriate sized i-gel device, water soluble lubricant, tape or i-gel airway support strap, stethoscope, bag valve mask (BVM), nasal cannula (NC), non-rebreather mask (NRM), suction device, waveform capnography ETCO2 monitoring equipment.

Performance Criteria: The individual is required to describe the indications/contraindications for placement of an adult i-gel device and proficiently perform the procedure on an adult airway manikin.

Step	Description	Does	Does Not
1	Verbalizes/demonstrates use of appropriate PPE		
2	Verbalizes selection of appropriate i-gel device based on patient size: • Size 3 – i-gel small adult device (30-60kg) • Size 4 – i-gel medium adult device (50-90kg) • Size 5 – i-gel large adult device (90+kg)		
3	Verbalizes i-gel device indications: • Patients in need of advanced airway protection and/or unable to be adequately ventilated with a BVM when orotracheal intubation is unavailable or unsuccessful • Patients in need of rapid advanced airway control when orotracheal intubation is anticipated to be difficult or likely to interrupt continuous chest compressions		
4	Verbalizes i-gel device contraindications: • Intact gag reflex • Caustic ingestion • Unresolved complete airway obstruction • Trismus or limited ability to open the mouth and insert the device (relative) • Oral trauma (relative) • Distorted anatomy that prohibits proper device placement (relative)		
5	Verbalizes the procedures that should be utilized prior to placement of an i-gel device as patient condition and circumstances permit: • If possible, pre-oxygenate with high flow O_2 via NRM or BVM as appropriate for three (3) minutes • Apply high flow NC (10 – 15 L/min) in addition to NRM or BVM to augment pre-oxygenation • Position patient in a semi-recumbent or reverse trendelenburg position if possible • Continue utilizing passive oxygenation via NC during i-gel device placement		

Step	Description	Does	Does Not
6	Opens the package and removes the protective cradle containing the i-gel device		
7	Removes i-gel device from the protective cradle and transfers it to the palm of the same hand, supporting the device between the thumb and index finger		
8	Places a small amount of a water-based lubricant onto the middle of the smooth surface of the protective cradle		
9	Grasps i-gel device with the opposite (free) hand along the integral bite block and lubricates the back, sides and front of the cuff with a thin layer of lubricant		
10	Inspects i-gel device to confirm there are no foreign bodies of lubricant obstructing the distal opening		
11	Places i-gel device back into the protective cradle in preparation for insertion		
12	Removes i-gel device from the protective cradle and grasps the lubricated device firmly along the integrated bite block		
13	Positions i-gel device so that the cuff outlet is facing towards the chin of the patient		
14	Instructs other rescuer to stop ventilations and removes OPA		
15	Places patient's head in the 'sniffing' position and gently presses down on the chin		
16	Introduces the leading soft tip of the i-gel device into the patient's mouth in a direction towards the hard palate		
17	Glides the i-gel device downwards and backwards along the hard palate with a continuous but gentle push until a definitive resistance is felt: • The teeth should be resting on the integral bite block • Sometimes the 'give-way' is felt before the end point resistance is met – It is important to continue to insert the device until a definitive resistance is felt • Once definitive resistance is met and the teeth are located on the integral bite block, do not repeatedly push the device down or apply excessive force during insertion		
18	Attaches a BVM to the i-gel device and ventilates at appropriate rate and volume		
19	Confirms i-gel device patency with physical assessment (chest rise, auscultation over the epigastrium and bilaterally over each lung), and waveform capnography ETCO2 monitoring equipment		
20	Properly secures i-gel device using tape or airway support strap		
21	Re-evaluates i-gel device placement after each patient movement or upon transfer of care to other prehospital or hospital personnel		