

Supraglottic Airway Standardized Evaluation	Original Date	September 2017
	Issue Date	
	Revision No.	
	Revision Date	
	Section	
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	Adult		Pediatric		Neonate		Initial		Annual Recurrent		Review
Name			Employee #			Evaluator			Date		

Supraglottic Airway Device (SAD)	Pass/Fail
States indication(s), contraindication(s), and complication(s) for SAD placement.	
Places patient on monitor, pre-oxygenates and suctions as needed prior to insertion.	
Identifies the correct SAD size, based on device specifications.	
Applies water-based lubricant to the back, sides, and front of the SAD.	
Places the patient in a sniffing position unless suspected spinal injury.	
With non-dominant hand, opens the mouth applying a chin lift.	
Introduces the leading soft tip into the mouth in the direction of the hard palate.	
Glides the SAD down and back along the hard palate with continuous but gentle pressure until definitive resistance is felt.	
Explains that a feel of 'give-way' may be felt before end point resistance is met as the SAD moves through the bowl of the faucial pillars.	
Places so that the SAD tip sits at the upper esophageal opening, the cuff is against the laryngeal framework, and incisors rest on the bite block.	
Does not repeatedly push down or apply excessive force during insertion.	
Secures SAD using commercial device.	
Attaches ventilation with continuous wave form capnography.	
Confirms absence of abdominal sounds and presence of bilateral breath sounds.	
Discusses C collar placement to minimize head / neck movement.	
Evaluator/Instructor Initials:	

Evaluator/Instructor Comments:

Overall Evaluation (Pass/Fail)	Requires Additional Training (Yes/No)