



Critical care begins in the street

Rapid Sequence Intubation

Regions Hospital EMS has a long and proud tradition of providing progressive prehospital medical oversight and education to our partner agencies. Because of this, you are among an elite group of EMS providers who bring the advanced technique of RSI outside the confines of a hospital. With this privilege comes responsibility and you should anticipate a rigorous training and testing program to ensure mastery of the techniques, skills and knowledge necessary to safely provide RSI to our patients.

The required RSI text book is intended to provide background on the topic of RSI; however, we do not necessarily agree with all of the opinions expressed by the author(s). Specifically, if there is any discrepancies we feel that atropine in pediatrics is appropriate and that vecuronium is a good paralytic option for EMS as rocuronium requires refrigeration. In our experience, succinylcholine is the best paralytic for RSI. We may also use slightly different medication doses than are reported in the book.

The book discusses several medications used for RSI but we would like you to focus your attention on the medications we will use: etomidate, ketamine, succinylcholine and vecuronium. You should be familiar with the concepts of Rapid Sequence Airway (RSA), Rapid Sequence Intubation (RSI), and be able to discuss the differences and pros/cons of each of these techniques.

Pay particular attention to the section(s) discussing the difficult airway, backup airway techniques and the use of the bougie. We will be mandating the use of the bougie for ALL RSI attempts based on the improved first-pass success rate as shown in the medical research literature.

You do not need to memorize any specific difficult airway algorithm but instead be comfortable with the options for airway management you can employ in patients you may not be able to intubate. Think in terms of what is available in our system (BLS techniques, i-Gel, cricothyrotomy) and how you would decide which backup option is most appropriate for an individual patient.

RSI is a very high risk technique and we take our responsibility to train each of you very seriously. Moreover, our responsibility to our patients is even greater. For these reasons we will mandate excellence from each of you before you are authorized to perform RSI. This will take longer for some than others and there are medics who will not be successful on their first attempt. Taking the time to read and understand the concepts in this book is the first step toward successful completion of RSI training.



Regions Hospital

Emergency Medical Services

RSI Endorsement Requirements

Your supervisor or training officer will contact the Regions Hospital EMS office to apply for RSI endorsement on your behalf. You must maintain credentials at the ALS level to apply for and use this endorsement.



- Complete the required RSI education modules in MyLearning
- Review the RSI algorithm with a clinical supervisor
- Pass the RSI written test
- Practice scenarios on your own or with a clinical supervisor
- Final RSI test-out scenario with a medical director

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**Thank you
for your service!**



Partners in EMS



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