

Position Statement

Drug Assisted Intubation

It is the position of the Medical Directors' Committee of the Governor's EMS and Trauma Advisory Council regarding drug assisted intubation (DAI) in prehospital care.

- 1) The decision and responsibility to delegate medical authority for DAI, to whom, to what extent, and by what means and the ongoing supervision of its use lies solely within the purview of the EMS Medical Director under their independent medical judgment under Texas Rule (TAC, Title 22, Pt. 9, Ch. 197).
- 2) Direct, personal and ongoing involvement and oversight by the EMS Medical Director is essential to the inclusion of DAI on a list of authorized procedures for an EMS provider.
- 3) Inclusion of DAI as an available modality must include appropriate and adequate training, individual credentialing, regular practice, and post-utilization review.
- 4) Training and procedure for DAI must address, at a minimum, appropriate patient selection, medications utilized, techniques of intubation, methods of endotracheal tube placement confirmation, adverse effects of the procedure and management of complications including failure to intubate.
- 5) Presumed successful DAI, as with any intubation procedure, must be verified by clinical measures such as capnography, capnometry, and/or oximetry.

Without meeting these key considerations, it is the position of the Medical Directors' Committee that DAI poses an unacceptable risk to the patient.