



Australian Government

HLTANA010 Assist with airway management

Release: 1

HLTANA010 Assist with airway management

Modification History

Supersedes and is not equivalent to HLTANA003 Assist with airway management.

Application

This unit describes the skills and knowledge required to provide assistance to the anaesthetist in airway management during anaesthesia and resuscitation, including difficult and emergency airways.

The unit applies to anaesthetic technicians working under the direction of, and in consultation with, an anaesthetist, in any hospital or day surgery setting.

The skills in this unit must be applied in accordance with Commonwealth and State or Territory legislation, Australian standards and industry codes of practice.

No occupational licensing, certification or specific legislative requirements apply to this unit at the time of publication.

Pre-requisite Unit

Nil

Competency Field

Anaesthetic Technology

Unit Sector

Health

Elements and Performance Criteria

ELEMENTS

Elements describe the essential outcomes

PERFORMANCE CRITERIA

Performance criteria describe the performance needed to demonstrate achievement of the element.

1. Select, check and prepare airway management equipment.
 - 1.1. Review information about patient and type of surgical procedure and anticipate type and calculate size of airway management equipment.
 - 1.2. Identify and respond to situations where anaesthetist needs to confirm selection.
 - 1.3. Conduct pre-use safety check of selected equipment in accordance with manufacturer guidelines.
 - 1.4. Diagnose airway management equipment faults and rectify within scope of role.
 - 1.5. Prepare and position equipment for use following safe manual handling techniques.
2. Perform bag and mask ventilation.
 - 2.1. Position patient for bag or mask ventilation.
 - 2.2. Confirm adequate ventilation and rectify any issues under the direction of the anaesthetist.
 - 2.3. Insert oropharyngeal or nasopharyngeal airway if indicated by the anaesthetist.
 - 2.4. In consultation with the anaesthetist determine when to cease bag or mask ventilation.
3. Assist with insertion of supraglottic airway devices.
 - 3.1. Select, conduct pre-use check and prepare supraglottic airway devices (SAD).
 - 3.2. Anticipate needs of the anaesthetist.
 - 3.3. Assist with positioning of patient.
 - 3.4. Provide assistance during insertion.
 - 3.5. Inflate cuff of SAD in accordance with manufacturer guidelines, clinical indications and anaesthetist's directions.
 - 3.6. Secure airway into position when directed.

4. Assist with insertion of oral or nasal endotracheal or endobronchial tubes.
 - 4.1. Select, conduct pre-use check and prepare endotracheal or endobronchial tube and other intubation equipment as required.
 - 4.2. Assist with positioning of patient for intubation.
 - 4.3. Anticipate needs of the anaesthetist.
 - 4.4. Provide assistance with insertion including use of stylet, bougie or laryngeal manipulation external technique.
 - 4.5. Inflate cuff according to industry standard, if applicable.
 - 4.6. Measure cuff pressure.
 - 4.7. When indicated, assist with insertion of throat pack including appropriate documentation of insertion and removal.
 - 4.8. Use a stethoscope to identify breathing sounds, if directed.
 - 4.9. Secure airway into position when directed.
5. Assist with rapid sequence induction.
 - 5.1. Determine rationale for rapid sequence induction under the direction of the anaesthetist.
 - 5.2. Select, conduct pre-use check and prepare equipment for rapid sequence induction.
 - 5.3. Inform patient of procedures to be completed by the anaesthetic technician.
 - 5.4. Apply cricoid pressure, monitor patient for vomiting and regurgitation, only remove pressure when instructed by the anaesthetist.
 - 5.5. Assist with insertion of endotracheal tube.
 - 5.6. Secure into position if directed.
6. Assist with predicted difficult airway and intubation.
 - 6.1. Discuss and confirm equipment preparation, intubation plan and contingencies with anaesthetist.
 - 6.2. Select, undertake pre-use safety checks and prepare required equipment.
 - 6.3. Inform patient of tasks to be undertaken by anaesthetic technician.
 - 6.4. Anticipate anaesthetist needs in patient preparation and assist throughout intubation.
 - 6.5. When appropriate, return clean equipment to storage location and send used equipment for processing.
 - 6.6. Debrief with anaesthetic team on outcome of intubation.

7. Assist with connection and disconnection of patient to and from ventilation equipment during maintenance phase.
 - 7.1. Select and prepare ventilation equipment and materials.
 - 7.2. Set ventilation modes, parameters and ensure warning devices are switched on, tested and are registering that the equipment is safe prior to use with patient under the direction of the anaesthetist.
 - 7.3. Observe equipment whilst in use and take action immediately if fault develops to avoid danger to equipment, patients and staff.
 - 7.4. Follow established procedures to rectify faulty equipment.
 - 7.5. Check patient's physiological parameters when required or as directed by anaesthetist.
 - 7.6. Identify, validate and report deviations from acceptable limits of physiological parameters to the medical practitioner.
 - 7.7. Report signs of patient discomfort, distress or adverse reaction to the anaesthetist.
8. Assist in management of patient's airway during emergence phase.
 - 8.1. Assist anaesthetist with patient positioning to facilitate management of patient's airway.
 - 8.2. Assist anaesthetist to optimise oxygenation of patient.
 - 8.3. Assist with oral, nasal, endotracheal and SAD suctioning.
 - 8.4. Assist anaesthetist as required during SAD removal or extubation and be prepared for possible reintubation.
 - 8.5. Provide reassurance to the patient and take action to limit injury.
 - 8.6. Observe patient's condition throughout the procedure and take action when required or at the direction of the anaesthetist.

Foundation Skills

Foundation skills essential to performance are explicit in the performance criteria of this unit of competency.

Unit Mapping Information

Supersedes and is not equivalent to HLTANA003 Assist with airway management.

Links

Companion Volume implementation guides are found in VETNet -

<https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=ced1390f-48d9-4ab0-bd50-b015e5485705>

Assessment Requirements for HLTANA010 Assist with airway management

Modification History

Supersedes and is not equivalent to HLTANA003 Assist with airway management.

Performance Evidence

Evidence of the ability to complete tasks outlined in elements and performance criteria of this unit in the context of the job role, and:

- follow established airway management processes and techniques including performing or assisting with at least 10 of each of the following:
 - pre-oxygenation
 - bag or mask ventilation
 - Supraglottic Airway Device (SAD) insertion
 - oral insertion of endotracheal tubes
 - airway management during emergence
- follow established airway management processes and techniques including performing or assisting with at least three of each of the following:
 - endobronchial tube insertion
 - nasal insertion of endotracheal tubes
 - laser tubes
 - rapid sequence induction
 - predicted difficult airway (Awake Fibreoptic Intubation (AFOI))
 - attaching patients to ventilators
 - tracheostomy tube if available at the workplace
- perform or assist with airway management on different patient types of varied ages, both conscious and unconscious
- respond and adapt to airway management problems:
 - routine
 - unpredictable
- perform the activities outlined in the performance criteria of this unit during a period of at least 360 hours of work related to anaesthetic technology in a clinical workplace environment. These 360 hours may be applied collectively across all units of competency that include the requirement for workplace hours for the purposes of assessment.

Knowledge Evidence

Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit:

- national, state or territory legal and ethical considerations for airway management, and how these are applied in organisations:
 - codes of practice
 - duty of care
 - infection prevention and control
 - informed consent
 - mandatory reporting
 - privacy, confidentiality and disclosure
 - records management
 - rights and responsibilities of workers, employers and patients
 - work role boundaries including responsibilities and limitations
 - work health and safety (WHS), manual handling and safe patient positioning techniques
- considerations for airway management in different types of surgery, including:
 - general, regional, local anaesthetic and sedation
 - remote site including radiology, electroconvulsive therapy (ECT) and endoscopy
 - general and gastro-intestinal surgery
 - ear, nose and throat surgery
 - gynaecological surgery
 - obstetric surgery
 - orthopaedic surgery
 - vascular surgery
 - urological surgery
 - oral, dental, and maxillofacial surgery
 - cardiothoracic surgery
 - neurosurgery
 - plastic surgery
 - trauma or emergency surgery
 - ophthalmic surgery
- airway equipment, including function and operating guidelines, use, indications and limitations, and criteria for withdrawal for:
 - laryngoscopes blades
 - fiberoptic bronchoscopes
 - videoscopes
 - cricothyrotomy kits
 - oral and nasal airways
 - oral endotracheal tubes
 - laser tubes
 - nasal endotracheal tubes
 - tracheostomy tubes

- endobronchial tubes and blockers
- supraglottic airway devices including 1st and 2nd generation
- jet insufflations
- intubation adjuncts including bougie, stylet, Magill's forceps
- high flow oxygen including transnasal humidified rapid insufflation ventilatory exchange (THRIVE)
- types of suction equipment, its indication for use and hazards associated with usage
- airway management procedures, common issues and scope of technician role in:
 - bag or mask ventilation
 - supraglottic airway device insertion
 - insertion of endotracheal tube, orally or nasally and endobronchial tubes
 - rapid sequence induction
 - predicted difficult airway
 - unanticipated difficult airway
 - airway management during emergence
 - emergency airway algorithms
 - gas induction
- patient considerations for airway management:
 - relationship between patient positioning techniques and optimal airway management
 - pre-medications and their effects on respiration
 - causes, signs and symptoms of loss of airway
 - remedial actions to address loss of airway
 - type of surgery, including shared airway
- anatomy, physiology and pathophysiology factors that impact airway management for different patient groups
- medical terminology specific to airway management
- roles and responsibilities of those participating in the anaesthetic procedure
- Australian and New Zealand College of Anaesthetists (ANZCA) Policy Guidelines
- Difficult Airway Society Guidelines
- laser safety
- radiation safety.

Assessment Conditions

Skills must be demonstrated in the workplace with the addition of simulations and scenarios where the full range of contexts and situations have not been provided in the workplace.

Assessment must ensure access to:

- use of suitable facilities, equipment and resources, including:
 - airway management equipment:
 - nasal and oral endotracheal tubes
 - tracheostomy tubes

- laryngoscopes, including video, conventional, McCoy and fibreoptic
- video or fibreoptic bronchoscopes
- endobronchial tubes and endobronchial blockers
- other difficult intubation equipment
- emergency airway equipment
- intubation aids including stylet, bougie and exchange catheter
- oropharyngeal and nasopharyngeal airways
- Supraglottic airways
- anaesthetic circuits
- self-inflating bag resuscitator
- face masks
- connectors
- filters
- Magill's forceps
- high flow oxygen including Trans nasal humidified rapid insufflation ventilatory exchange (THRIVE)
- general medical equipment:
 - suction equipment for oesophageal and tracheal suction
 - throat packs
 - lubricant
 - scissors
 - syringes
- monitoring equipment:
 - electrocardiography (ECG)
 - stethoscope
 - oxygen and gas analyser, spirometer, airway pressure and carbon dioxide monitor
 - cuff pressure gauge
 - pulse oximetry
 - neuromuscular transmission monitor
 - entropy
 - arterial blood gas measurement
- personal protective equipment (PPE)
- paediatric and adult mannequins for initial simulated assessment
- modelling of industry operating conditions, including presence of situations requiring problem solving in non-routine situations.

Assessors must satisfy the Standards for Registered Training Organisations' requirements for assessors.

Links

Companion Volume implementation guides are found in VETNet -

<https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=ced1390f-48d9-4ab0-bd50-b015e5485705>