

**Data Supplement 1.** A standardized pre-procedural checklist for intubating trauma patients.

The checklist has two components: 1) pre-arrival checklist to be completed before the patient arrives in the resuscitation bay, and 2) pre-induction checklist to be completed after the decision to intubate and before rapid sequence intubation medications are administered.

<b><u>1) Pre-Arrival Checklist</u></b>
<b>All items must be verbalized by physician responsible for intubation</b>
<ol style="list-style-type: none"><li>1. Oxygen mask and nasal cannula available and connected to oxygen</li><li>2. Oral airway available</li><li>3. Suction available and running</li><li>4. Laryngoscope blade and handle available and functional</li><li>5. Tube/stylet available and shaped appropriately</li><li>6. Extra tubes and stylet available</li><li>7. Bougie available</li><li>8. Backup devices available (including laryngeal mask airway, King Airway System, cricothyrotomy kit)</li><li>9. Monitors and video laryngoscope screen positioned appropriately</li><li>10. Bag-valve mask with ETCO<sub>2</sub> attachment available</li><li>11. IV fluid available</li><li>12. Individual designated to hold cervical spine stabilization</li><li>13. Airway plan verbalized</li></ol>

<b><u>2) Pre-Induction Checklist</u></b>
<b>All items must be verbalized by the Nurse Scribe and confirmed by the physician responsible for intubation</b>
<ol style="list-style-type: none"><li>1. Pre-arrival checklist completed</li><li>2. Airway plan confirmed between Trauma and ED attending physicians</li><li>3. IV line functioning</li><li>4. Rapid sequence intubation medication and doses confirmed and drawn up</li><li>5. Cervical spine inline stabilization initiated (if necessary)</li><li>6. Pre-oxygenation underway with mask at 15 liters/min and nasal cannula at 5 liters/min</li><li>7. Patient positioning optimized</li><li>8. Blood pressure cuff placed on opposite arm of IV line and pulse oximetry probe</li></ol>