

Failed BLS airway management (or require a rescue airway):	<input type="checkbox"/>
Unable to manage the airway by BLS methods (or require a rescue airway)	<input type="checkbox"/>
Description outlining the need for the use of BIAD airway management	<input type="checkbox"/>
Number of attempts:	<input type="checkbox"/>
An attempt is defined as a BIAD inserted into the oropharynx	<input type="checkbox"/>
BIAD Size:	<input type="checkbox"/>
LMA (#1, #2, #2.5, #3, #4, #5)	<input type="checkbox"/>
KING Airway (#3, #4, #5)	<input type="checkbox"/>
BIAD secured with commercially prepared device:	<input type="checkbox"/>
Orogastric Tube: (for BIADs equipped with suction port):	<input type="checkbox"/>
Size, placement, and measurement	<input type="checkbox"/>
Neck stabilization after BIAD placement (protection of airway placement)	<input type="checkbox"/>
Cervical collar or blankets	<input type="checkbox"/>
BIAD placement confirmation (Initial):	<input type="checkbox"/>
Waveform EtCO ₂ , lung sounds, chest rise	<input type="checkbox"/>
Ventilation rate after BIAD insertion:	<input type="checkbox"/>
BIAD placement reassessment after each patient move (subsequent):	<input type="checkbox"/>
Waveform EtCO ₂ , lung sounds, chest rise	<input type="checkbox"/>
Assessment:	<input type="checkbox"/>
Improved perfusion	<input type="checkbox"/>
Skin color	<input type="checkbox"/>
Oxygenation (SpO ₂)	<input type="checkbox"/>
Airway difficulties or challenges:	<input type="checkbox"/>
Clearing of secretions (blood, emesis, etc.)	<input type="checkbox"/>
Equipment failures	<input type="checkbox"/>
Miscellaneous details	<input type="checkbox"/>