

AIRWAY MANAGEMENT EVALUATION FORM

Fellow: _____

Date: _____

Faculty: _____

Fellow Year: 1 2 3

Elective
Intubation

Emergency
Intubation

SYSTEMS	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Writes/dictates a complete and accurate procedure note		1	2	3	4	5
PROFESSIONALISM	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Interaction with assistants		1	2	3	4	5
Interaction with patient		1	2	3	4	5
Accepts feedback, incorporates suggestions		1	2	3	4	5
KNOWLEDGE	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Establishes indication for procedure		1	2	3	4	5
Demonstrates knowledge of airway assessment tools (e.g. Mallapati, lip-bite, etc)		1	2	3	4	5
Establishes plan for failed direct laryngoscopy		1	2	3	4	5
Demonstrates understanding of mechanisms for post-intubation hypotension		1	2	3	4	5
Chooses appropriate medications, dosage range & timing for patient's condition		1	2	3	4	5
Demonstrates knowledge of indications/contraindications for muscle relaxation		1	2	3	4	5
TECHNICAL SKILLS	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Assembles and readies all necessary equipment		1	2	3	4	5
Properly positions and pre-oxygenates patient		1	2	3	4	5
Administers medications in appropriate timing/ sequence		1	2	3	4	5
Demonstrates ability to bag mask ventilate patient		1	2	3	4	5
Demonstrates ability to control airway and intubate patient		1	2	3	4	5
Uses multiple methods to establish ETT location		1	2	3	4	5
Identifies and manages complications of procedure appropriately		1	2	3	4	5
Demonstrates ability to perform all aspects of this procedure independently		no	yes	SEE COMMENTS ON BACK		

This evaluation was reviewed and discussed with fellow (date) _____
Fellow _____ Evaluator (initial) _____