



SEDATION-ASSISTED INTUBATION PROGRAM

SAI ALS PERSONNEL COMPETENCY ASSESSMENT CHECKLIST

This checklist should be used by each ALS service medical director when approving an ALS practitioner to use sedation-assisted intubation. The ALS practitioner must meet all requirements and the ALS service must maintain documentation of approval before an ALS practitioner may perform SAI.

REQUIREMENTS		YES	NO
1	ALS practitioner has completed SAI education program under oversight of the ALS service medical director, including:		
	A. Competent in identifying appropriate patients for SAI	<input type="checkbox"/>	<input type="checkbox"/>
	B. Competent at skill of endotracheal intubation	<input type="checkbox"/>	<input type="checkbox"/>
	C. Competent in use of service's non-surgical alternative/rescue airway device	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Name of Provider		Certification Number	
Name of Service		Service Affiliate Number	

APPROVALS			
Service Medical Director	Print Name	Signature	Date
Regional Medical Director	Print Name	Signature	Date
Regional EMS Council	Print Name	Signature	Date
Original to EMS Region – Copy to ALS Service			