ICU  
**Draft 6/14/95**

**INTUBATION PROCEDURE NOTE**

**Date:**

**Time:**

**Indication:**
- [ ] Respiratory Failure
- [ ] Airway Protection
- [ ] Other: 

**Route:**
- [ ] Orotracheal
- [ ] Nasotracheal

**Sedation:**
- [ ] Cetacaine
- [ ] Parenteral: 

**Blade Type:**
- [ ] Mac
- [ ] Miller Size: [ ] 2  [ ] 3  [ ] 4

**Tube Size:**
- [ ] 6
- [ ] 7
- [ ] 8
- [ ] 6.5
- [ ] 7.5
- [ ] 8.5
- [ ] 9

**Complications:**
- [ ] None
- [ ] Esophageal Intubation
- [ ] Mainstem Intubation
- [ ] Unsuccessful attempt
- [ ] Other:

**Breath Sounds:**
- [ ] Equal B/L
- [ ] Diminished
- [ ] Other: 

**CXR:**
- [ ] Pending
- [ ] Tube in good position
- [ ] Malpositioned Tube

**Physician's Signature**

**Date**