

Type of Procedure	Crash Caesarean Sectio
Airway	GA. Intubate. VL from the start.
Anaesthetic technique	GA: Propofol/Pentho/Sevo
Epidural/Spinal	
Premedication*	Sodium citrate 30 ml per os. Preoxygenate 8 deep breaths 100% oxygen
Short tips for the anaesthetist	Muscle relaxation with: Suxamethonium (Celocurin) or high-dose Rocuronium. Consider ketamine/etomidate! Sevo/lost gas initially. Opioid before preeclampsia. Fentanyl after cord clamping. Keep head end elevated, lateral tilt. Cricoid pressure according to local protocol (continuously applied when used). Intubate with a videolaryngoscope if available – higher first-pass success.
Recommended vascular access	1–2 peripheral IV cannulas depending on the extent of the procedure. Adapt according to the anticipated risk of bleeding.