**TRACHEOSTOMY CARE**

*ENSURE EMERGENCY TRACHY TRAY AT BEDSIDE.*
Tray contains: Cuffed tubes (Shiley or Portex) size 8, (7 or 6)&Shiley Size 4DCFS(Non cuffed)
Tracheal dilator
Scissors
Velcro/ cotton ties (use cotton ties if patient confused)
Suture cutter and pen torch
10ml syringe
surgilube x2 and sleek tape.

*Ensure tracheostomy sign placed over patients bed*
**SUCTION EQUIPMENT** must be working and at patients bedside.
*Suction vacuum pressure <20kpa or 150mmHg*
*Sterile catheter tip and technique.*
*Only as required (prn) and record on trachy monitoring sheet.*
*Ensure suction container changed when over ¾ full.*
*Suction catheter to be inserted approx pens length into tracheostomy tube (no more than 1cm beyond tube length).No suction applied on catheter insertion only on outward journey.*
*Recommended time from insertion to removal = 15seconds*
*Suction catheter size= size of trachy tube x3 answer divided x2*
*eg size 8 shiley tube x 3 divided by 2=12 so size 12 suction catheter used.*

**HUMIDIFICATION.**
Types: Sofshield bib, swedish nose/saline nebs.
Heated: **AIRVO 2**
*Kendall Aerodyne.*

**CARE OF INNER CANNULA.**
*Check patency at beginning of every shift, then 4 hrly or more frequently if required.*
*If clean and patent can reinset. *If soiled, dispose in infectious waste bag and insert new disposable inner cannula.*
Inner cannula must be the same size as trachy tube.
*Ensure box of disposable inner cannulas at patient’s bedside.(Shiley inner cannulas 10 per box, Portex 20 per box)*
**To order inner cannulas**
Mon-fri before 17.00 call 2660 ward stores, at weekends obtain from other wards.
**PASSY MUIR SPEAKING VALVE (PMV)**
*Ensure no contraindications before fitting PMV(refer to Tracheostomy Guidelines)*
*Ensure tracheostomy cuff deflated before PMV applied.*
*If cuff inflated remember to ask WHY? Patients on the ward should not need cuff inflated unless instructed by anaesthetics/team or if pt less than 24 hrs post insertion.*
*Please ensure speaking valve removed at night when sleeping.*
**CUFFED TUBE PRESSURES.**
If tracheostomy cuff is inflated, cuff pressure should be monitored at least once daily.
Cuff pressure limits must be within the range of 25-32 CmH2O.
**Document trachy observations on EPR, iView-lines and devices-Airway management.**
**TUBE DISLODGEMENT**

*If tracheostomy tube becomes dislodged DON’T PANIC.*

Once tube insitu more than one week the tract is usually well formed and will not close over straight away.

*If tube insitu less than 10 days a stay suture should be taped to patients chest. By pulling on this suture the airway is usually opened to facilitate tube replacement.

1 Call for help. Inform ward staff to inform appropriate person:

Anaesthetist on call #889 or #666.

Mon-Fri 07.30-16.00 tracheostomy nurse #538

Staff St Johns ward for support/advice ext 2181.

2 While waiting for help to arrive.

Reassure the patient,

Open trachy emergency tray at bedside, take out trachy dilator.

Keep stoma open by gently inserting dilatator. Ensure correct position metal parts should be north and south.(see picture 1)

If patient desaturates administer O2 via stoma. If stoma appears to have closed over try via face mask.

3 Have trachy tube same size and a size smaller ready for the person to insert the new tube.(use cotton ties to secure tube if patient confused)

4 Have patient reviewed by medical person after event.

5 Complete risk occurrence form

**Resuscitation via tracheostomy**

Treat as any other patient PLUS,

*Expose patient’s neck, and check inner cannula patent.*

*If patient has a cuffed tube, inflate cuff with 5-7 mls air.*

*If patient has non cuffed tube have cuffed tube ready for anaesthetist to insert. Cuffed tubes size 6 & 8 available in trachy tray at patient’s bedside.

*Catheter mount located in 3rd drawer of resus trolley to be applied to trachy and ventilate using ambu bag. Commence resuscitation 30 compressions to 2 breaths

**TYPES OF TUBE**

**Disposable Shileys (4mm, 6mm, 8mm, 10mm):**

- Cuffed non fenestrated ~ DCT
- Cuffless non fenestrated ~ DCFS
- Cuffed fenestrated ~ DFEN
- Cuffless fenestrated ~ DCFN

**Shileys Tracheosoft XLT Extended Length (6mm, 7mm, 8mm):**

Proximal ~ extra length required for increased skin to tracheal wall distance.

Distal ~ longer distal shaft for patients with tracheal stenosis.

**Portex (7mm, 8mm, 9mm):**

Blue Line Ultra suctionaid ~ cuffed non fenestrated

**Portex Adjustable flange (7mm,8mm,9mm)**