



**St. James's Hospital
Tracheostomy Care Working Group.**

**Tracheostomy: Bedside Equipment Requirements SOP
SJH:N069.1 version 5.**

This Standard Operating Procedure (SOP) is effective from September 2020 onwards and is due for renewal in September 2023. It will be reviewed during this time as necessary to reflect any changes in best practice, law, and substantial organisational, professional or academic change. This SOP is supplementary to the [Tracheostomy Care and Management Guideline \(SJH:N069\)](#). This SOP describes standards for setting up and managing bedside equipments required for providing care to patients with Tracheostomy.

1.0 Bedside Equipment Requirements

1.1 It is the responsibility of the nurse assigned to the patient's care to ensure at the beginning of each shift that the equipment they need is readily accessible, i.e. assembled at the bedside and functional.

1.2 The bedside equipment should include a **Sealed tracheostomy tray containing the following equipments (as shown in the picture):**

- Spare Tracheostomy tubes cuffed Portex suctionaid size 7 and 8 and Shiley size 4 (Non- cuffed).
- Tracheal Dilators.
- 10ml syringe.
- Tracheostomy Tapes (Cotton and Velcro).
- Stitch Cutter.
- Scissors.
- KY Gel.
- Sleek Tape.
- Pen torch.
- Sealed tracheostomy tray (yellow laminated prompt sheet)



1.3 Trays are available on St. Johns' ward if you have none available in your own area. If all trays are in use, please ensure that you have a tracheal dilatator and spare tracheostomy tube (the same size and a size smaller) available at the bed space until a tray can be located.

1.4 If laryngectomy patient: a laryngectomy or tracheostomy tray is also suitable.

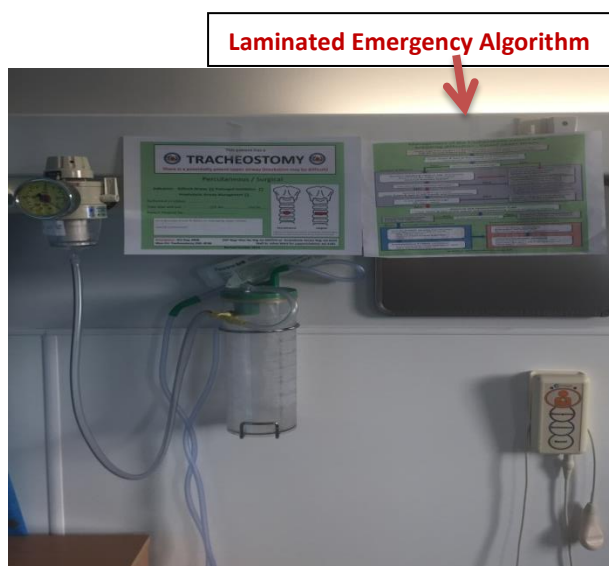
Laryngectomy tray should include:

- Spare Tracheostomy tubes cuffed Portex suctionaid size 7 and 8 and Shiley size 4 (Non- cuffed).
- Tilleys forceps.
- 10ml syringe.
- Tracheostomy Tapes (Cotton and Velcro).
- Stitch Cutter.
- Scissors.
- KY Gel.
- Pen torch.
- sealed laryngectomy tray (pink laminated prompt sheet)



- 1.4.1** Laryngectomy tray contains a Tilleys forceps. It is important to note that **IT DOES NOT CONTAIN A TRACHEAL DILATOR** therefore, is not suitable to have at a tracheostomy patient's bed space.
- 1.5 Humidification Equipment:** The equipment required depends on the humidification method being used. Refer to [Humidification of Inspired Gases SOP \(SJH:N069.7\)](#) for additional information.
- 1.6 Suctioning Equipment required:**
- Suction machine fitted with filter.
 - Suction tubing.
 - Suction catheters (refer to [Suctioning SOP \(SJH:N069.5\)](#) for information on size selection).
 - Gloves (see 1.8).
 - Bottle of sterile water/saline to rinse tubing – change daily.
 - Face mask with visor/ goggles
- 1.7 Gloves:** Non-sterile for general handling and sterile glove for suctioning.
- 1.8 Infectious waste bag.**
- 1.9 Communication aid:** e.g. Pen & paper, magic writing board, white board, alphabet chart, iPad, picture chart etc.
- 1.10 Spare inner cannula:** This must be the same type and size as the tube that is in place (refer to [Tracheostomy guideline SJH:N069](#), point 4.3.2.3 for further information).
- 1.11 Tracheostomy bed signs.** Two signs must be placed over the patient's bed space. Sign with details specific to the patient facing outward and laminated sign with emergency airway algorithm facing outward (as shown in 1.11.1). Laminated signs can be wiped clean using soapy water between patients or klorsept 17 if isolation infection risk identified.

- 1.11.1 Position of bed signs over bed space:** 2 signs must be placed side by side over the patients' bed space. Laminated emergency algorithm must be placed at bed space beside the non-laminated patient specific tracheostomy/laryngectomy bed sign.



Links to related PPPGs:

- [Tracheostomy Care and Management Guideline \(SJH:N069\)](#)
- [Tracheostomy Care and Management Guideline: Associated Documents](#)