

Tracheostomy Suctioning

PROCEDURAL GUIDANCE

1. Verify student orders are current and complete. Note the size of the suction catheter (Fr) and depth of suction catheter insertion (cm).
2. Explain the procedure at the student's developmental level. Consider self-management goals and encourage participation as appropriate.
3. Perform hand hygiene. Place the supplies on a clean surface. Open packages and maintain standard precautions.
 - a. Suction catheter
 - b. Suction machine with tubing
 - c. Gloves
 - d. Ambu bag
4. Test the suction source prior to student use. Occlude the suction tubing to adjust suction pressure between 80-120 mm Hg for children and adolescents.
5. Position the student comfortably, with trach visible and accessible.
6. Do not touch the part of the catheter to be inserted. Attach the suction catheter to the suction machine tubing.
7. Gently insert the catheter into the trach to the appropriate depth measurement.
8. Apply continuous suction as the catheter is withdrawn.
9. Monitor student tolerance. Limit suctioning to 5-10 seconds or less.
10. Assess the need for more suctioning and repeat the above steps. Allow the student recovery time between passes of the suction catheter.
11. Flush the catheter with sterile water or saline if indicated to maintain patency. Consider that most suction catheters are for single use only.

OTHER CONSIDERATIONS FOR CARE

- Report changes in the student's respiratory status, level of consciousness, or level of comfort with trach suctioning.
- Document the type, amount, and color of secretions, and the general condition of the stoma and integrity of surrounding skin.
- Standard precautions are recommended in the home and community setting.
- Suctioning should be performed when clinically indicated based on the nursing assessment.
- Gagging or coughing may indicate the catheter has been advanced beyond the length of the trach. This can irritate tracheal tissue.
- The routine installation of normal saline (NS) is not recommended. Research indicates the use of NS can impair gas exchange and increase the risk of infection.
- Evidence does not support rotating the catheter or turning the child's head side-to-side for suctioning.
- Never insert a suction catheter into a trach that was used to suction the nose or mouth.
- Closed-system suction uses a plastic sheath to enclose the catheter and attach directly to the tracheostomy or ventilator.