The Adult with a Tracheostomy

You have a tracheostomy (trach), which is a surgical incision (opening) made into the trachea or windpipe. A small plastic tube called a trach, is placed into the opening to keep it from closing. The opening/hole in the neck is called a stoma.

You will breathe air through this opening (stoma) instead of your nose or mouth. This also means that the ability to talk or speak aloud may be lost. The length of time a trach is required varies from days to years, depending on the reason it was required. Your doctor will discuss with you how long you can expect to have the trach tube.

You have a tracheostomy because: ____________________________________________
____________________________________________________________________________
____________________________________________________________________________

Before you go home, you will need to learn how to take care of your trach:

1. You should watch a respiratory therapist, or a nurse do trach care, and then begin to do it on your own.
2. It is important that you and a significant other (if applicable) begin learning trach care.
3. The social worker will talk with you about any supplies or home health care services you will need.

My Trach

Permanent Inner Cannula:  Disposable Inner Cannula:

My trach size at discharge:

Type of trach I have:
Home Tracheostomy Care
Parts of the Tracheostomy Tube

1. **The Tracheostomy**
   Inserts into the neck, fits into the trachea or windpipe to keep your airway open so that you can breathe easily.

2. **The Outer Cannula**
   The permanent portion of the tube that keeps the airway open.

3. **The Flange**
   Used to secure the tracheostomy tube to the patient’s neck.

4. **Inner Cannula**
   The tracheostomy tube provides a way to clean the trach tube without removing the entire artificial airway.

5. **Obturator**
   Provides stability to the semi-flexible parts of the outer cannula of the tracheostomy tube when inserting it and prevents damage to the wall of the trachea.

**Signs of an emergency, or need for emergent care (Call 911):**
*Difficulty breathing (even after suction), discoloration of skin (blue or very pale), changed mental status or changes in behavior.*

**How to clean a Tracheostomy Site and Inner Cannula (Trach Care)**

This home packet will tell you:
1. what you will need.
2. why to do trach care.
3. when trach care should be done.
4. what to do if something goes wrong.
5. what else you need to know.
What Will I Need?

- Cup of lukewarm water
- 4-8 cotton tip swabs
- 4 pipe cleaners
- Mirror
- Scissors (preferably blunt tip)
- Trach ties (twill tape)
- Telfa or sof wik 2x2 dressing (optional)

Why Do I Do Trach Care?

1. To prevent tracheostomy site infections.
2. To keep the trach tubes open and free from phlem or mucus so you can breathe.

When Should I Do Trach Care?

1. Every day.
2. If you have pain or drainage from you stoma, do it 2-3 times a day.

How Do I Do Trach Care?

1. Wash your hands. This is the most important way to prevent infection. You should wash your hands before and after every time you do something with your trach, even if you wear gloves. If gloves are used, use powderless gloves only, so that you do not inhale the powder and irritate your lungs.

2. Put 4 swabs in the cup of water.
3. You will need to suction trach to keep the airway clear of mucus. To do this, gather suction supplies. You will need:
   a. suction machine and tubing.
   b. suction tube (catheter) kit (includes suction tube and gloves)
   c. water (for suction tube/catheter rinse)
   d. clean container for water if one did not come with suction tube (catheter)
**Suctioning Procedure**

Done prior to starting trach care procedures and whenever necessary to help with coughing up your mucus.

1. Wash your hands with warm soapy water. Choose a comfortable position such as sitting in front of a mirror.
2. Turn suction machine on. (Pressure should not be more than 120 mmhg; adjust gauge as needed.)
3. Open the suction tube kit.
4. Remove the rinse container and fill with normal water.
5. Put on gloves.
6. Suction some water through the suction tube to make sure it is clear and the machine is working. You will need to put your thumb over the opening of the tube to get suction.
7. Take 3 to 4 deep breaths before suctioning.
8. Without applying suction (do not put your thumb over the hole yet), insert the suction tube into the trach slowly and smoothly. Insert suction tube, stopping when you cannot move it any more or when you gag.
9. Place thumb over opening at the top of the suction tube and twirl suction tube as you pull it back from the trach (this should take about 5-10 seconds). Wait about 30 seconds between suctioning giving yourself a chance to catch your breath.
10. Suction water through the catheter to clear secretions between trach suctioning.
11. Repeat steps 7-10 as necessary.
12. Suctioning of the trach will cause coughing. This is normal. Coughing helps to loosen mucus so it is easier to suction out.
13. Look at secretions (mucus). Check the color, smell, thickness or thinness, and how it may have changed from the last time you suctioned your trach.
14. Throw away water from rinse container. (Container may be rinsed with HOT SOAPY WATER and reused.)

**Clean Stoma**

1. Remove the old dressing
2. Using swabs from water cup, clean all around the trach site.
3. Throw away used swabs.
4. Never use a petroleum base product like Vaseline on trach site because you could breathe it into your lungs. If there is dryness or irritation to your stoma site, please inform your physician or other healthcare provider for advice. Petroleum based products are very thick and if inhaled would cause lots of coughing as they could not easily be coughed out. These thick products could also lead to an infection.
5. Look closely at your trach site. **CALL YOUR DOCTOR IF**: you notice any redness, swelling, irritation, bleeding, green discharge or food.
Clean or Change out Inner Cannula

1. If trach has a **permanent inner cannula**, hold outer cannula with one hand to steady it.
2. Using the other hand, unlock and remove the inner cannula.

   ![Hold trach securely with one hand](image1)
   ![Twist inner cannula with the other to unlock and remove it.](image2)

3. Pour water through inner cannula. **DO NOT SOAK.** Take 2 pipe cleaners and push them through the inner cannula to remove any mucus. Repeat as needed.
4. Place inner cannula in water cup to rinse.
5. Take inner cannula out of cup and shake off water.
6. Put inner cannula back into the outer cannula. Turn the top to lock it.

   ![Be sure to hold flange when inserting inner cannula! Begin to reinsert inner cannula. Stabilize flanges with other hand. Twist inner cannula to lock it.](image3)

   a. Hold the trach in place.
   b. Have your assistant remove the old trach tie.
   c. Continue to hold the trach while your assistant replaces the trach ties. Cut 2 pieces of twill tape. Cut angle on one end of each piece. Cut a small (1/2 inch) slit one inch from angled end of each tie. Thread angled end of tie from bottom to top of opening in trach flange- pull straight end through slot. Repeat process for other side.
   d. Tighten trach tie. Make sure only 2 fingers can fit easily between the ties and your neck. Tie and knot.
   e. Throw away cups, swabs, pipe cleaners and old trach ties.
8. **If inner cannula is a disposable** DO NOT CLEAN. Hold the outer cannula (neck flange) with one hand. With the other hand squeeze the snap-lock and pull the inner cannula out of the outer trach tube using a downward motion.

9. Throw away the used inner cannula.

10. Gently squeeze the snap-lock of the new inner cannula and insert it into the outer tube. Release the snap-lock connector when it securely locks onto both sides of the connector rim.

**How Do I know if Something Is Wrong**

Your tracheostomy stoma:

1. is swollen.
2. has an increased amount of drainage.
3. has drainage with a changed color, or odor.
4. stoma site is more red than usual.
5. is painful.
6. there is blood in the mucus.
7. food is coming out of trach.
8. increase need for suctioning/thick mucus/or increase secretions when you suction.
9. sores around stoma.
10. loss of appetite.
11. irritable, sluggish or confused behavior.

All of the above needs to be reported to your health care provider.
**Things To Remember**

Remember, normally you breathe through your nose, but now air goes in and out through the direct opening into the trachea. Be careful to protect the airway tubes and lungs.

1. Smoke will irritate your lungs and cause you to have more difficulty breathing.

2. When you are outside and it may be windy/hot/cool/dry, a handkerchief or scarf wrapped loosely around the neck will warm and filter the air and help keep the moisture in.

3. You may take a tub bath but always keep the water out of the trach/stoma. A shampoo should be done at a different time than bath time to keep water from getting in the trach. DO NOT SWIM. Getting pool water into the trach can easily cause an infection and/or irritation to the lungs. Swimming with a trach could also result in drowning.

4. Fine hair from pets may cause irritation to your trach or cause increased coughing. If possible, pets should not be in the house.

5. Swallowing food and liquid may be troublesome for a few people with tracheostomies.
   
   Some things to prevent problems are:
   a. sit upright to eat.
   b. eat slowly.
   c. chew your food slowly.
   d. focus on your swallowing.
   e. tilt your chin down and in as you swallow.
   
   If you are having problems, avoid foods with seeds and ground meat such as hamburger. Remember that liquids are often harder to swallow than foods that are in gel form.

6. IF you notice food or liquids in your cough secretions let your doctor know
   
   Immediately, as this is a sign that there is food/drink getting into your lungs, which may cause an infection or choking.
What To Do If You Have A Hard Time Breathing

1. You may have secretions in your trach tube. You can either take the inner cannula out, clean and replace it, or cough hard and suction yourself if coughing alone does not work.
2. You may have secretions in your windpipe beyond the trach tube. Again, try coughing. If that does not work, suction yourself.

What To Do If You Simply Can’t Breathe Through Your Trach

It is unlikely that this will happen, but if it does it is either because the tube has slipped out of position or you have coughed up secretions that are plugging your trach tube.

Stay Calm!!!!

1. Take out your inner cannula.
2. If that does not work, cut the ties and take out your trach tube and cough hard or suction yourself through your stoma.
3. As you breathe in, gently insert the new tube with obturator, pushing back then down in an arcing motion.
4. Immediately remove the obturator, while holding the tube in place with your fingers.
5. Insert the new inner cannula making sure that it is properly secured in place.
6. Place new trach ties with assistance.

If you don’t know how to put the trach back in or just can’t put it back in, call 911.

Signs of an emergency, or need for emergent care (Call 911):
Difficulty breathing (even after suction), discoloration of skin (blue or very pale), changed mental status or changes in behavior.

References:


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            October 2010
Home Regimen Specifics:

Frequency of tracheostomy care normally:

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Frequency of tracheostomy care with increased secretions and/or infection:

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Special Instructions for Home Care:

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