

racheostomy tube Suction catheter inner diameter **Suction Catheter** .0 mm 10Fr 10Fr .5 mm 10Fr 6.0 mm 5.5 mm 12Fr 14Fr .0 mm .0 mm 14Fr

## **SUCTION CATHETER**

14Fr

# What to do if trachy:

9.0 mm

Blocked/dislodge/bleeding in HOSPITAL

- Call for help—senior/assistant
  - alert staff with tracheostomy care skill.
- Clear airway— sucked out blood clot / secretion
  - feel if there is air coming out from tube.
- If bleeding— packed around the tube
   With adrenalin gauze—
   use compression / finger
   pressure / inflate trachy

If dislodge— try to reinsert tube using smaller size tube or intubate patient.







#### Disediakan Oleh:

Wad 7TD (Otorhinolaryngology Ward)

#### Sebarang Pertanyaan Sila Hubungi

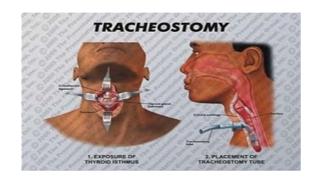
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## WHAT IS TRACHEOSTOMY?

Tracheostomy is an incision or surgical access in a cervical trachea to allow air enter lower respiratory, by passing the upper segment of respiratory tract at 2nd, 3rd and of trachea ring.



#### **INDICATIONS**

- 1. Obstruction of the upper airway
- 2. Impaired respiratory function
- To assist weaning from ventilator support
- 4. To help clear secretions in the upper airway

#### COMPLICATION

- 1 Pneumonia
- 2 Apnea
- 3 Air Embolism
- 4 Surgical Trauma
- 5 Heamorrhage

# TYPE OF TRACHEOSTOMY

# **Cuff Tracheostomy Tube**



- First tube inserted after tracheostomy to prevent blood from flowing into the trachea.
- The cuff creates an air tight seal for mechanical ventilation.
- To prevent aspiration for patient who has impaired swallowing.

# **UNCUFF TRACHEOSTOMY TUBE**



For prolonged stay patient For home use

# DOUBLE CANNULAE TRACHESTOMY TUBE

- Inner cannulae reduces the frequency of the tube becoming blocked with secretions.
- It can be removed washed and re-inserted while the outer tube remains to keep the stoma to open.



# FENESTRATED TRACHEOSTOMY TUBE



This tube assists in directing airflow to pass through the patient's oropharynx and larynx as well as into the trachea, helps the patient to speak.

#### CARE OF TRACHEOSTOMY

# Stoma care

- Wash your hands
- Clean with normal saline and barrier cream applied to the local skin (cotton wool use should be avoided)



# TO .

# Care of inner canula

- Wash your hand
- Pull the inner canula out of the tube, using a downward motion.
- Use a small nonabrasive brush or pipe cleaner to gently remove mucus
- Inner canula to be dried on disposable paper towel





Reinsert the clean twist-lock inner canula into the tube and secure it.