



Tracheostomy

UHN

What You Need to Know Information For Patients



Patient Education
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Page 1 of 12

What is a Tracheostomy?

A tracheostomy is a surgical opening through the throat into the windpipe. The opening is usually temporary, but not always. This depends on your diagnosis.

Your surgeon will make this opening in your throat to help you breathe more easily. To keep your windpipe open, your surgeon will insert a tube into the opening. This is called a tracheostomy or "trach" tube.

Reasons for a Tracheostomy

The reason you need a tracheostomy is to help you to breathe. You may be short of breath for any of these reasons:

- your airway is swollen from surgery
- your airway is swollen due to radiation treatment
- you have an upper airway infection
- you have a tumour in your upper airway

Changes after a Tracheostomy

- You will now breathe through your trach tube.
- You will cough through your trach tube.
- You will not be able to speak for about 5 days after your surgery.
- After 5 days, your doctor will change your trach tube to a different type of tube. This is called a fenestrated trach tube. With this tube in your windpipe, you may be able to speak.
- If you go home with a trach tube, a nurse will teach you how to take care of it. Your teaching will begin after surgery.

What Does a Trach Tube Look Like?

1. Outer cannula - This is the outer part of the tube. It sits in the windpipe and keeps the airway open. You should never remove the outer cannula from your windpipe.



2. Inner cannula - This is the inner part of the trach tube. It fits inside the outer cannula. The inner cannula is taken out for cleaning and then put back in.



3. Obturator - This is also called the "introducer." The obturator has a smooth end and is used to insert the outer cannula into your windpipe.



4. Cork - This is a plastic cap that fits over the end of the inner cannula. Corking is done when your doctor thinks you are ready to try breathing through your nose and mouth. This is called trial breathing.



5. Trach plate - This is the flat part (flange) of the trach tube around its opening. The plate sits on your neck and holds your trach tube in place.

flange



6. Trach ties - These ties hold the flange to keep your trach tube snugly in place.



How to Care for Your Trach Tube

Your nurse will show you how to do this. To clean your trach tube, you will need:

- Hydrogen peroxide
- Normal saline (salt water)
- Q-tips
- Dixie cups
- A flat working surface
- A small brush
- Gauze squares
- Tracheostomy gauze
- Suction catheters
- Suction machine

You will get these supplies from Home Care. When they run out, you can buy them from a drug store or a medical /surgical supply store.

Preparing your Trach Tube Cleaning Supplies

- Collect the things you need to clean your trach.
- Wash your hands.
- Put the cleaning items on a flat surface, such as a table or counter top.
- Pour your cleaning solutions (hydrogen peroxide and normal saline) into the Dixie cups

1. Squirt and Suction

Squirt saline into your trach to keep the mucous in your lungs (your secretions) moist. This helps you to cough out your secretions.

a) Squirt

Stand in front of the mirror with your head tilted back.

As you breathe in, squirt saline solution into your trach tube. This will make you cough and clear the secretions.

If you cannot clear your secretions by coughing you must clear them using a suction catheter.

b) Suction

Put the suction catheter into your trach tube until you feel it can go no further.

Put your thumb on the opening of the suction catheter. This provides suction.

Keep your thumb on the hole as long as you are suctioning. Turn the suction catheter from side to side when you are taking it out of your trach tube.

Rinse the catheter in salt water if you need to use it again.

Do not put your thumb on the opening of the suction catheter while you are putting it in your trach tube.

Do not leave the suction catheter in your trach tube for longer than 8 or 10 seconds. Leaving it in longer will take your breath away.

2. Cleaning the Inner Cannula

- Unlock your inner cannula and take it out. Put it in the container of hydrogen peroxide.
- Clean your inner cannula with the brush provided. Brush the inside and the outside of the cannula.
- Rinse the inner cannula with normal saline (salt water). At home, you can rinse it under running tap water.
- Use the gauze squares to clean the outside of your inner cannula. Shake the inner cannula to remove saline from the inside. Do not worry if your cannula is not completely dry.
- Put the inner cannula back into your outer cannula. Turn the inner cannula until it locks in place.

3. Cleaning the Outer Cannula and the skin around it

- Dip a Q-tip in hydrogen peroxide and gently clean your trach plate and the skin around it. Try not to move your trach tube.
- Repeat this cleaning using Q-tips soaked in salt water.

4. Putting the Inner Cannula Back In

- Hold your trach plate in place with two fingers.
- With your other hand, put the inner cannula into the trach tube.
- Turn the inner cannula clockwise until the tube locks in. You will hear a click.
- To prevent skin irritation, put trach gauze under the trach plate.

Changing Trach Ties

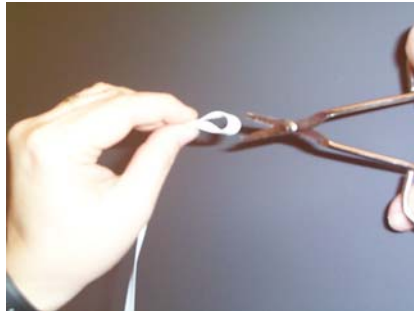
Do not remove your old trach ties until you have replaced them with new trach ties.

Method #1

1. Cut two pieces of trach tie material. Cut one piece 15 cm (6 inches) long. Cut the second piece 30 cm (12 inches) long.



2. Take one piece of trach tie and fold it 2 cm over the end. Cut a straight slit in the fold.



3. Put this tie through one of the holes in the flange (flat part of tube).



4. Pull the long end of the trach tie through the slit you just made. This will secure the tie to the flange.



5. Do this again with the second trach tie and the other flange hole.



6. Wrap the long piece of the tie around your neck until it meets the shorter piece. The two ends should meet at the side of your neck.
7. Knot the two ties on the side of your neck. Allow a one-finger space between your neck and the tie.
8. Cut and remove the old ties.

Method #2

1. Cut a piece of trach tie material 45cm (18 inches) long.
2. Insert one end of the tie through one of the holes in the flange (flat part of the tube).

3. Pull the tie through and around the back of the trach plate. Insert this end through the other hole from the back of the trach plate and pull ties even. Wrap the ties around your neck. Knot the ties together.



4. Allow a one-finger space between your neck and the tie.
5. Cut and remove the old ties.

Corking Your Trach Tube

Corking is when a plastic cap is placed over the end of the the inner cannula. You should cork your trach only if your doctor tells you to.

When your trach is corked, you breathe through your nose and mouth.

The cork is easy to remove. If you feel short of breath when the cork is on your trach, remove the cork from your trach immediately.

When the cork is off, you breathe through your trach tube.

Corking makes your voice sound clearer. It also makes you cough sputum into your mouth.

Do not sleep with your trach corked unless your doctor tells you to.

Questions You May Have While In The Hospital

Q: When can I eat and drink?

A: If you have only had a tracheostomy inserted, you may start clear fluids (e.g. apple juice, water, ginger ale, clear tea, etc.) within a few hours. You may gradually start eating your usual food.

Q: When can I talk?

A: You will not be able to talk for about 5 days. After 5 days your doctor will change your trach tube to a fenestrated tube. This is simple to do and not painful.

Q: I am coughing up blood. Is that normal?

A: Coughing up some blood after your trach surgery is normal.

Questions You May Have When You Are Home

Q: How often should I clean my trach tube?

A: In the beginning, clean your trach tube 3 to 4 times a day and more often if you need to. Later on, you will not have to clean the tube as often.

Q: How do I know when I need to suction?

A: You will need suctioning if you are not able to clear the mucous in your lungs (your secretions) by coughing. You may hear a gurgling or rattling of secretions in your throat.

Q: My skin around the trach plate is very red and sore. What should I do?

A: Always keep your skin clean and dry. Put Polysporin ointment or Vaseline on the skin around your trach tube. Put trach gauze under your trach plate. Change the gauze often to protect your skin. If the redness or soreness does not go away, call your doctor.

Q: I noticed some blood when I coughed out my secretions. What does this mean?

A: This could mean you need more moisture when you breathe. Your airway may be dry. Keep a cool mist vaporizer in your home and drink plenty of fluids. Use saline squirts to keep secretions moist.

Q: Can I shower?

A: Yes, you may shower. But do not get water in the trach tube. A hand-held showerhead works best for controlling where the spray goes.

Q: Can I suction my tube only through the outer cannula?

A: You may suction through the inner or the outer cannula. If the inner cannula is removed from the trach tube, suction through the outer cannula. If you have just finished cleaning your tube and have put the inner cannula back in, you do not have to take it out again to suction.

Q: Sometimes I feel I can't breathe. What should I do?

A: Stay calm. You may have a mucous plug or your inner cannula may be blocked. Take out your inner cannula and clean it. Squirt saline into your trach tube and cough out your secretions.

Suction yourself as needed. If you still feel you can't breathe, go to your nearest hospital Emergency Department.

Q: What happens if my trach tube falls out?

A: To stop your trach tube from falling out, make sure that your ties are securely tied. If your trach tube falls out, stay calm and call 911. Keep a pre-recorded tape message for calling 911. Have a friend or family member record a message on a tape that says "My name is _____ (your name). I live at _____ (your address). I cannot speak. I need emergency assistance.

Keep this message by your phone. Put your tube back in if you are able to.

Going Home

Before you go home:

- You and/or a family member must be able to do trach care.
- We will give you a prescription for pain medication.
- We will give you follow up instructions for an appointment with your doctor that will include your doctor's office telephone number.
- The Community Care Access Centre (CCAC) coordinator will visit you in the hospital and arrange for nurse to see you at home. This service is free. The government pays for it.
- The nurse will check on you in your home every day. These visits will stop when you both agree the time is right.

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