
How to Look After Your Tracheostomy Tube



**Head and Neck Unit
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What is a tracheostomy?

A tracheostomy is an opening into the trachea or windpipe made during an operation. This makes breathing easier. A tracheostomy may be needed:

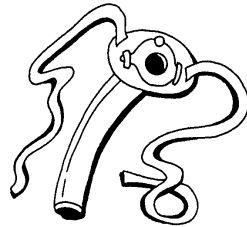
- a short time called temporary
- all of the time called permanent

What is a tracheostomy tube?

A tracheostomy tube is a hollow tube made of metal or plastic. It is put into the surgical opening so you can breathe. The hole is called a stoma.

There are 3 parts:

- The outer tube or cannula keeps the tracheostomy open. It has ties to keep it in place.



- The inner tube or cannula fits into the outer tube. It is removed for cleaning. It has a safety catch to keep it from falling out.



- The obturator fits inside the outer tube. It provides smooth entry of the tube into the tracheostomy site.



5. To clean, use soap and water and rinse with tap water. Hydrogen peroxide works well when the tube is crusted and filled with thick mucous. Rinse with tap water after any time you clean the tube.
6. Shake the excess water off the inside of the tube.
7. Clean the skin around the outer tube. Use a gauze square or cotton-tip swab moistened with 3% hydrogen peroxide.
8. Clean the faceplate of the outer tube with a cotton-tipped swab moistened with 3% hydrogen peroxide.
9. Put the inner tube back into the outer tube. Lock the safety catch. Hold your breath during this step to prevent coughing. If you have trouble putting the inner tube back, stay calm. Have someone at home help you. Call the visiting nurse, doctor or go to the nearest Emergency Department.
10. To prevent skin problems, check the skin under the tube for redness, swelling, ulcers or bleeding. Use products like Stoma Care[®] or Stomadhesive[®].
11. Check with your doctor or visiting nurse before you use any product on your skin.
12. Put a tracheostomy dressing under the tube next to your skin when needed. Most people begin changing a dressing every 4 hours and then move to 2 times a day when needed.

Cleaning the tubes

Never remove the outer tube unless:

- Your doctor has told you to
- You have been taught how to do this safely

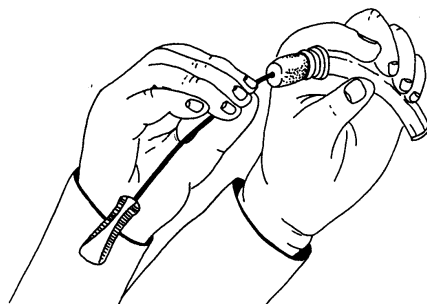
Cleaning the inner tube

- This tube needs to be clean and clear so you can breathe freely.
- Remove, clean and replace the inner tube 4 times a day or more often if needed.

Steps to clean the tubes:

Follow these steps to clean the tubes. Soon you will be able to do this without looking at these steps:

1. Support the faceplate of the outer tube with your fingers.
2. Unlock the safety catch.
3. Remove the inner tube.
4. Clean the inner tube using a small scrub brush or pipe cleaner.



Tie tapes

Change these when needed. Hold the faceplate of the outer tube in place while you change the tapes. This will prevent you from coughing the tube out by accident. The visiting nurse help you change the tapes until someone in your family learns how.

Remember

- Do not let water or food go into the tube.
- Take the obturator with you when you visit doctors, health care providers or clinics.

How do I suction the tracheostomy?

The amount of mucous you have varies. You have more when you have a cold or when the air around you is dry.

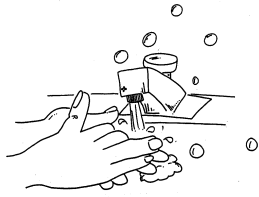
You need to suction to keep the trachea clear so you can breathe. Your trachea can be suctioned through:

- the inner tube or
- the outer tube when you are cleaning the inner one. This should only be done in an emergency.

You use a catheter to suction your trachea. This is a long, flexible, plastic tube. You will have a portable suction machine at home. The visiting nurse will show you how to use it.

Steps to suction:

1. Wash your hands.



2. Get supplies ready:

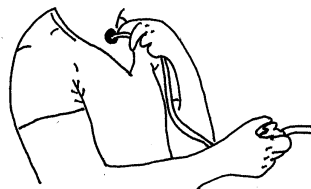
- suction machine
- catheter with an air-flow valve or Y-connector
- cup with salt water or saline

Make your own saline by mixing 2 teaspoons (10 ml) salt to 4 cups (1 litre) of boiled water. Cool boiled water to room temperature before using.

3. Sit in front of a well-lit mirror so you can see your tracheostomy clearly.

4. Pass the catheter into the tracheostomy tube until you feel an obstruction or you cough. This will be about 4 to 8 inches or 10 to 20 centimetres.

5. When the catheter is in place, apply suction by putting your finger over the air-flow valve or Y-connector.



6. Gently rotate the catheter in a circular motion while you pull the catheter out of the tube. This removes mucous on the sides of the tube.

7. Do not leave the catheter in the trachea more than 10 seconds each time you suction. Hold your breath and count to 10 as you pull the catheter out to remind you.

8. Rinse the catheter by putting it into the cup of saline and suctioning some up.

9. Repeat the steps to suction the tube until it is clear.

10. When you have finished suctioning, rinse the catheter in cold water. Put it in a clean towel for the next use.

How often should I change the dressing?

- The dressing should be changed when needed during daily care or when soiled.