



Portable Suction Machine



Suction Catheter



Safe Suction Depth



Saline Bullets to flush catheter



Why do I need to Suction?

When a person has a tracheostomy tube it is difficult for them to cough out their mucus on their own. Although some may cough out secretions on their own not all mucus is able to be cleared from the airway. If the mucus is not suctioned it increases the risk of the lungs developing infections leading to frequent hospitalizations.

How often do I need to Suction?

It will vary depending on the status of the child.

At a minimum:

- First thing in the morning, and right before bed.
- Before trach change.
- As needed.

Indications for need to be Suctioned

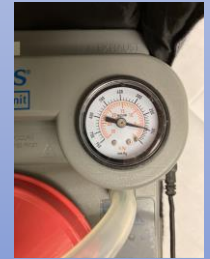
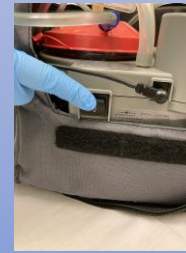
- Increased work of breathing, retractions, flaring of the nostrils, and sweating.
- Coughing, High Pressure Alarm Sounding (if vented)
- “Rumbling or Bubbling” audible noise heard. You may also place your hand on their chest to feel secretions.

What do I need to Suction?

- ✓ Suction machine and tubing
- ✓ Closed suction catheter (inline), proper size
- ✓ Normal saline bullets to flush catheter after finishing suctioning
- ✓ Safe Suction Depth Sheet, found in “Go Bag”
- ✓ Gloves and Hand Sanitizer

If your child is in distress and you are unable to pass the suction catheter through the trach tube, **PULL THE TRACH OUT AND INSERT A NEW ONE** as that trach may be plugged!

Suctioning Steps



1

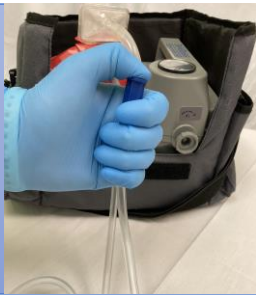
Wash hands or use hand sanitizer.

2

Put gloves on.

3

Turn on suction machine and verify suction pressure is between 80-120 mmHg



4

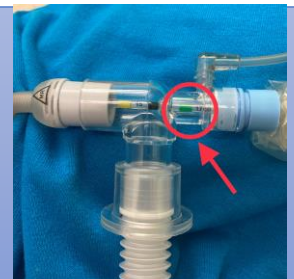
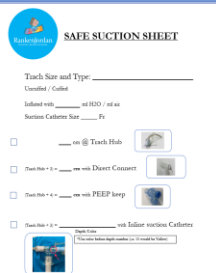
Verify that you have working suction, if not check connections

5

Connect suction tubing to inline catheter

6

Unlock suction port



7

Verify suction depth

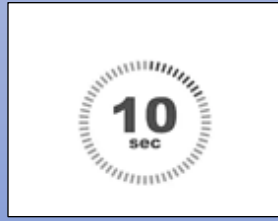
8

With one hand, stabilize the trach tube, while using the other hand to advance the catheter to the appropriate depth.

9

Suction Window

*make sure catheter is not twisted before starting!



If you still hear secretions repeat steps 6-10.

10

Depress thumb valve while slowly withdrawing the catheter. Don't let go of the thumb port.

Limit Suctioning time to < 10 sec, but < 5 sec is most ideal.

Optional Step If Secretions Are Really Thick



Repeat if necessary. You may also consider giving your child blow-by oxygen from the resuscitator bag if oxygen saturations decrease.

If needed you may extend past the suction depth by 1-2cm if patient has secretions that feel like it is "just there."

Attach pink saline bulb to saline port and rinse the closed suction catheter by depressing the thumb valve and then squeeze the saline drops into the port. *Be sure to continuously depress the thumb port while squeezing the saline.

★ Signs of illness include:

- Change in the amount, color, odor, or consistency of secretions.
- Increase in respiratory rate.