Downsizing Tracheostomy Tube

- 1. Criteria to downsize tracheostomy tube
 - a. After seven days do not down size tracheostomy tube prior to seven days post placement
 - b. Mental status appropriate to protect air way
 - c. Secretions less than every two hours
 - d. No active pneumonia
 - e. No aspiration of feedings

2. Procedure

- a. There should be two persons present at the tracheostomy tube change
- b. Who should do the first tracheostomy tube change?
 - Facility surgeon or Senior Resident
 - Senior Resident should have performed tracheostomy tube change with faculty surgeon before doing change by himself or teaching Junior Resident

c. Equipment

- Respiratory service by bedside
- Tracheostomy tray near bedside
- Smaller size tracheostomy tube set by bedside e.g. if tracheostomy tube size is 8.0 then have six 6.0 by bed side
- Endotracheal tube by bedside should have equipment available for placement of endotracheal tube
- Tracheostomy tube obturator by bedside
- Velcro tracheostomy tube tie by bedside
- Ambu bag by bedside
- Make sure there is adequate lighting
- Suction and suction catheter
- Endotracheal stylet

d. Technique

- Turn oxygen up to 100% for several minutes
- Check balloon on new tracheostomy tube
- Milk balloon back on the tracheostomy tube and remove all air
- Make sure obturator is in tracheostomy tube
- Wet balloon with saline
- Suction old tracheostomy tube with suction catheter
- Remove sutures hold tracheostomy tube to skin if still in place hopefully the will have been removed at seven days
- Make sure label retention sutures are not crossed the retention sutures are used to
 open tracheostomy incision in case tracheostomy tube has slipped out of trach do
 not pull hard on the sutures. If tracheostomy has been in place for two weeks or more
 remove retention sutures.
- If tracheostomy tube does not go in easily mask patient by mouth and open tracheostomy set do not jab tracheostomy tube or stylet wildly into tracheostomy site
- Deliver oxygen to tracheostomy opening