

Tracheostomy Tube Change

1. Seven days post placement
 - a. Should not change tracheostomy tube before seven days unless emergency e.g. plugged, broken balloon, tube has slipped out, etc.
 - b. Cut ties
 - c. Clean and change inner cannula
 - d. Replace trach ties
2. First tracheostomy tube change
 - a. First change should be performed at 14 days post placement
 - b. There should be two person present at the tracheostomy tube change – should not be single resident
 - c. Who should do the first tracheostomy tube change:
 - Facility surgeon or Senior Resident
 - Senior Resident should have performed tracheostomy change with faculty surgeon before doing change by himself or teaching Junior Resident
3. Equipment
 - Respiratory service by bedside
 - Nurse in room
 - Tracheotomy tray near bedside (or near by)
 - Endotracheal tube stylet (obtained from anesthesia)
 - Replacement tracheostomy tube
 - Smaller size tracheostomy tube by bedside e.g. if tracheostomy tube size is 8.0 then have 6.0 by bedside
 - Endotracheal tube by bedside – should have equipment necessary to place endotracheal tube – this could be crash cart by door
 - Tracheostomy tube obturator by bedside
 - New Velcro tracheostomy tube tie by bedside
 - Ambu bag by bedside
 - Make sure there is adequate lighting
 - Suction and suction catheter
 - Scissors at bedside to remove skin sutures
 - Oxygen source
4. Technique
 - Turn oxygen up to 100% for several minutes
 - Check balloon on new tracheostomy tube
 - Milk balloon back on to tracheostomy and remove all air
 - Make sure obturator is in tracheostomy tube
 - Wet balloon with saline
 - Suction old tracheostomy tube with suction catheter
 - Remove skin sutures that held old tracheostomy tube
 - Make sure labeled retention sutures are not crossed – the retention sutures are used to open tracheotomy incision in case tracheostomy tube has slipped out – do not pull hard on the 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 in tracheostomy tube site
 - Deliver oxygen to tracheostomy opening
 - Mask ventilation if necessary

- Call for help
- Begin opening up equipment
- Consider endotracheal intubation
- Consider passing endotracheal stylet IF tracheotomy incision opening can be visualized