

Caring for your tracheostomy and what to do in an emergency

Nursing

A guide for patients and carers

How do I care for my tracheostomy?

• Check the inner tube every 2-4 hours (2 hourly if recently had radiotherapy)

Clean it if you see any secretions (phlegm) inside. You may need to check and clean the inner tube more frequently if you are producing a lot of secretions

- Always have a clean inner tube ready, to put in while you're cleaning the dirty one
- Change the tracheostomy dressings at least once a day or more often if they become dirty
- The Velcro holders securing the tracheostomy in place need changing at least once a week or more often if they become dirty. This is a two person job – one person to hold the tracheostomy tube in place and the other person to remove and replace the holder. For the first few times change them when your District Nurse is with you
- Wear a Heat Moisture Exchanger (HME) also known as a Buchanan Bib over the tracheostomy tube all the time. This is especially important at night, to help keep the secretions loose
- Make sure you have a way of attracting attention at night if you need help, for example have a bell by your bed or emergency pendant



What should I do if the tracheostomy becomes blocked?

- 1. Remove the inner tube and replace with a clean one
- 2. If you are still in difficulty, suction the tracheostomy tube

Then either:

3a. If this relieves your symptoms, have a nebuliser immediately and arrange to come to hospital outpatients for a check-up

Or

3b. If you are still in difficulty, call 999 immediately

What should I do if the tracheostomy falls out?

- 1. Keep calm as you will still be able to breathe, but immediately:
- Try to put the whole tube back into the hole. It goes in the same direction as when you put the inner tube into the outer one. Use some water based gel e.g. Aquagel or KY jelly, to make this easier
- 3. If this is difficult, try to put the next size down tube in the hole
- **4.** If you can't do this, call **999** and use the tracheal dilators to hold the hole open

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We rely on a number of sources to gather evidence for our information. All of our information is in line with accepted national or international guidelines where possible. Where no guidelines exist, we rely on other reliable sources such as systematic reviews, published clinical trials data or a consensus review of experts. We also use medical textbooks, journals and government publications.

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Issue date: April 2021 Issue no: 1.0 Reference: LNURTRAC Review date: April 2023