

## MANDATORY TRACHEOSTOMY EQUIPMENT

### *Staff this document applies to:*

- Nurses, Medical Staff, Speech Pathologists, Physiotherapists on all campuses, including ICU.
- Does not apply to the community.

### *Who is authorised to perform this procedure?:*

The primary nurse caring for the patient is responsible for ensuring that mandatory tracheostomy equipment is present at the bedside and during transport of the patient.

The receiving nurse must ensure mandatory equipment arrives with the patient.

### *State any related Austin Health policies, procedures or guidelines:*

- [Tracheostomy - Management of Patients with Tracheostomy](#)
- [Tracheostomy -Changing a Tracheostomy Tube](#)
- [Tracheostomy – Recognising and Clearing a Blocked Tracheostomy Tube](#)
- [Tracheostomy - Emergency Response to Accidental Tracheostomy Decannulation](#)
- [Tracheostomy - Stoma Care](#)
- [Tracheostomy - Planned Tracheostomy Decannulation Procedure](#)
- [Tracheostomy - Humidification of Inspired Gases in Patients with a Tracheostomy](#)
- [Tracheostomy - Suctioning via the Tracheostomy Tube](#)
- [Tracheostomy – The Suctionaide Tube, use of](#)

### *Definition:*

1. **Mandatory Bedside Tracheostomy Equipment:** This is essential equipment that is present and accessible at the bedside and is available for routine and emergency care of patients with tracheostomy tube.
2. **Mandatory Transport Tracheostomy Equipment:** This is the equipment which must accompany a patient who has a tracheostomy during all transfers within Austin Health or to another hospital.

### *Clinical Alert:*

- **The patient with tracheostomy in situ is at risk of respiratory failure and/or arrest in the event of complications or emergencies.**
- **All safety equipment must be accessible at the patient bedside and during transport for use in the event of complications or emergencies.**
- **Tracheal dilators must only be used by trained staff.**

### **Rationale:**

To ensure that all appropriate equipment for tracheostomy care and emergency management is immediately available for routine care and management of tracheostomy emergencies.

### **Expected Outcome:**

- All mandatory equipment will be readily available and visible at the patient's bedside before the patient arrives on the ward and at all times.
- When a patient who has a tracheostomy tube is transported anywhere in the hospital or to another hospital, he/she is sent with the tracheostomy mandatory equipment
- When any mandatory equipment is used it will be replaced immediately.

### **Equipment:**

#### **1. Mandatory Bedside Tracheostomy Equipment**

- Tracheostomy checklist (available via SMR: M31.43)
- Humidifier set at 37° C. This can be sourced from CSSD Level 3, Phone: 5503
- Clean gloves
- Suction catheters: standard size 12fg (If a mini tracheostomy tube is in situ, size 8 or 10fg will be required).
- Yankauer sucker.
- Cuff manometer. This can be sourced from TRAMS during business hours (Phone: 3095) or transferring ward after hours.
- Tracheal dilators, for use by trained staff only. (Sterile Stores Level 2 Phone 3860)
- Air Viva (disposable or reusable) with tracheostomy connector and face mask. (Sterile Stores Level 2 Phone 3860)
- 10ml syringe.
- 2 spare tracheostomy tubes (one the same size as the tube in situ and another one size smaller). (Sterile Stores Level 2 Phone 3860 or contact TRAMS for advice)
- Water for cleaning suction tubing
- Waste disposal bag.
- Suction canister, tubing and suction device.
- Tracheostomy dressings (pre-cut by the manufacturer).
- Tracheostomy tapes
- Protective eyewear

#### **2. Mandatory Transport Tracheostomy Equipment**

- All items listed in 'Mandatory Bedside Equipment'
- Portable suction unit that has been endorsed by TRAMS.

### **Procedure:**

- Ensure the above mandatory equipment is available at the patient's bedside and is in working order at the commencement of each shift.
- If a patient is being transported ensure the mandatory transport tracheostomy equipment is sent with the patient and receiving nurse can locate.

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### **In Conjunction With**

- TRAMS Team and Tracheostomy Review Committee

### **Legislation/References/Supporting Documents:**

Agency for Clinical Innovation (ACI); Care of Adult Patients in Acute Care Facilities with a Tracheostomy: Clinical Practice Guideline; published October 2012, [www.aci.health.nsw.gov.au](http://www.aci.health.nsw.gov.au)

National Confidential Enquiry into Patient Outcome and Death. (2014). On the Right Trach? A view of the care received by patients who underwent a tracheostomy. NCEPOD. [http://www.ncepod.org.uk/2014report1/downloads/On%20the%20Right%20Trach\\_FullReport.pdf](http://www.ncepod.org.uk/2014report1/downloads/On%20the%20Right%20Trach_FullReport.pdf)

Bodenham, A; Bell, D; Bonner, S; Branch, F; Dawson, D; Morgan, P; McGrath, B; Mackenzie, S; Standards for the care of adult patients with a temporary Tracheostomy: Standards & Guidelines; *Tracheostomy Care; Intensive Care Society Standards*, 2014; [www.ics.ac.uk/ics-homepage/guidelines-and-standards/](http://www.ics.ac.uk/ics-homepage/guidelines-and-standards/)

Mitchell, R; Hussey, H; Setzen G; Jacobs, I; Nussenbaum B; Dawson C., Brown, C; Brandt C; Deakins, K; Hartnick, C; Maerati, A; Clinical Consensus Statement; Tracheostomy Care Otolaryngology – Head and Neck Surgery published on line September 2012

Morris, L & Sherif Afifi, M. Tracheostomies: The Complete Guide. Springer Publishing Company, 2010; Laws-Chapman C, Rushmer F, Miller R, Flanagan K, Prigmore S, Chabane S.

Seidman B; Goldenberg D; Sinze E; Tracheostomy Management A multidisciplinary Approach Cambridge University Press 2011

### **Authorised/Endorsed by:**

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TRAMS Policy and Procedure Committee

### **Primary Person/Department Responsible for Document:**

Tracheostomy Review and Management Service (TRAMS)