Suctioning a Tracheostomy

**Goal:** To remove excess mucous secretions to maintain patient airway; to collect sputum or secretions for diagnostic testing.

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Satisfactory</th>
<th>Needs Practice</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Verify the physician order and identify the client.
2. Wash your hands.
3. Explain procedure and purpose to client.
4. a. Position the conscious client with an intact gag reflex in a semi-Fowler’s position.
   b. Position the unconscious client in a side-lying position facing you.
5. Turn on suction device and adjust pressure: infants and children, 50 to 75 mm Hg; adults, 100 to 120 mm Hg.
6. Open and prepare sterile suction catheter kit.
   a. Unfold sterile cup, touching only the outside. Place on bedside table.
   b. Pour sterile saline into cup.
7. Preoxygenate client with 100% oxygen. Hyperinflate with manual resuscitation bag.
8. Don sterile gloves. If kit provides only one glove, place on dominant hand.
9. Pick up catheter with dominant hand. Pick up connecting tubing with nondominant hand. The nondominant hand is now considered clean rather than sterile. Attach catheter to tubing without contaminating sterile hand.
10. Place catheter end into cup of saline. Test function of equipment by applying thumb from nondominant hand over open port to create suction.
11. Insert catheter into trachea through artificial airway during inspiration (Fig. 6).
12. Advance catheter until you feel resistance. Retract catheter 1 cm before applying suction. Note: Client usually will cough when catheter enters trachea.
13. Apply suction by placing thumb of nondominant hand over open port. Rotate the catheter with your dominant hand as you withdraw the catheter. This should take 5 to 10 seconds.
15. Rinse catheter thoroughly with saline.
### Suctioning a Tracheostomy *(Continued)*

**Goal:** To remove excess mucous secretions to maintain patient airway; to collect sputum or secretions for diagnostic testing.

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Satisfactory</th>
<th>Needs Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16. Repeat Steps 10 to 14 until airway is clear, limiting each suctioning to three passes.

17. Without applying suction, insert the catheter gently along one side of the mouth. Advance to the oropharynx.

18. Apply suction for 5 to 10 seconds as you rotate and withdraw catheter.

19. Allow 1 to 2 minutes between passes for the client to ventilate. Encourage deep breathing. Replace oxygen if applicable.

20. Repeat Steps 16 and 17 as necessary to clear oropharynx.

21. Rinse catheter and tubing by suctioning saline through.

22. Remove gloves by holding catheter with dominant hand and pulling glove off inside-out. Catheter will remain coiled inside the glove. Pull other glove off inside-out. Dispose of in trash receptacle.

23. Turn off suction device.

24. Assist client to comfortable position. Offer assistance with oral and nasal hygiene. Replace oxygen device if used.

25. Dispose of disposable supplies.

26. Wash your hands.

27. Ensure that sterile suction kit is available at head of bed.