

CENTRAL CALIFORNIA
EMERGENCY MEDICAL SERVICES
A Division of the Fresno County Department of Public Health

Manual:	Emergency Medical Services Administrative Policies and Procedures	Policy Number: 510.05 Page: 1 of 2
Subject:	Basic Life Support (BLS) Protocols TRACHEOSTOMY CARE/SUCTIONING	
References:	California Administrative Code, Title 22, Division 9, Chapter 2	Effective: 11/15/83

I. Indications:

- A. Any patients with a tracheostomy and experiencing respiratory distress.

II. Procedure:

A. Possible Tracheostomy Problems

1. Obstruction (Partial/Complete)

- Excessive secretions
- Dried secretions
- Swelling/Infection
- Foreign Body
- Bleeding (Rare)

B. Treatment:

1. 100% oxygen by BVM or mask to trach based on patient ability to ventilate. Do not use oxygen powered breathing device on a tracheostomy.
2. Suctioning (use sterile technique, if possible).
 - Preoxygenate (i.e., hyperventilate for one minute prior to suctioning).
 - Irrigate with 3cc NS through trach (i.e., saline flush, irrigation syringe).
 - Tell patient to inhale.
 - Insert suction catheter gently until resistance is felt.
 - Tell patient to cough/exhale.
 - Suction during withdrawal of catheter.

Approved By:	Daniel J. Lynch (Signature on File at EMS Agency)	Revision:
EMS Division Manager		04/19/2005
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EMS Medical Director		

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C. Contact Base Hospital for medical direction if:

1. Patient not improving after above treatments.
2. Patient develops subcutaneous emphysema.
3. Patient is bleeding from tracheostomy.
4. Tracheostomy tube is dislodged.
5. You have any questions.

NOTE: Do not delay transport. STAT transport, contact base hospital enroute to closest appropriate facility and consider rendezvous with ALS unit (refer to EMS Policy 510.03).