



Tracheostomy Mandatory Equipment	
Scope (Staff):	Nursing, Medical
Scope (Area):	PMH/PCH

This document should be read in conjunction with this [DISCLAIMER](#)

Aim

All appropriate tracheostomy equipment for general care and emergency management will be present, maintained and readily accessible.

Risk

Compromised patient safety.

Key Points

- All nursing staff must work within their scope of nursing practice. It is their responsibility to know the limits of their practice relating to care of the child with a tracheostomy and to seek advice from senior nursing staff and/or medical staff to ensure the best outcome for the patient.
- It is the responsibility of the nurse caring for the patient to know why specific equipment is needed and when it would be required.
- Mandatory equipment must be kept at the patient's bedside at all times. It must accompany the patient to any other location e.g. Theatre, X-ray, playroom etc.
- It is the responsibility of the nurse caring for the patient to ensure that the mandatory equipment is available on a single trolley, is checked and working at the commencement of each shift and a record of checking is documented on the nursing care plan.
- The patient's current individualised Airway Profile is to be placed at the head of the bed in a visible position.
- Staff must be familiar with all related tracheostomy management procedures in the [Clinical Practice Manual](#).

Mandatory Tracheostomy Equipment

Equipment	Additional Information
Tracheostomy tubes: Tracheostomy tube of the same size	Check size of tube inside the box correlates to the size indicated on the box. Never leave empty boxes at the bedside.
Tracheostomy tube one size smaller (contact ENT doctor within 24 hours if used).	Marked ' <i>for emergency use only.</i> '
Airway Profile	Ensure it is the most current
OTHER REQUIREMENTS Pulse Oximeter.	
Introducer for the tube in situ.	May be required to reinsert the current tube.
Self-inflating bag and face mask. (+ neonatal facemask e.g. Laerdal 00, for patients with non-patent upper airway) ¹	Correct size; check function See Resuscitation Trolley & Checking
High flow oxygen meter (0-15L).	
Suction equipment with gauge.	up to 150mmHg/ 20kPa
Suction catheters.	
Stethoscope	
Normal saline ampoules and 2mL syringes	
Humidification; Heat Moisture Exchange (HME) - with & without oxygen attachment	Both must be readily available at bedside even if the child is not receiving oxygen. Correct size HME or humidified air/oxygen circuit.
Spare tracheostomy tapes or bead chains.	Correct size.
Scissors or wire cutters.	To cut tape/chain in an emergency.
Water soluble lubricant.	
Roll	For under shoulders.
Container of water.	To flush suction tubing.
Equipment required for routine tracheostomy care.	Nebuliser pot and tubing, stoma care, dressings etc.
Tracheostomy Dilators (<i>in hospital only</i>) Paediatric < 8yr; Adult >8yr	For the first 3 weeks after stoma formation and for children with Non Patent Upper Airway.
Personal Protective Equipment.	Disposable non sterile gloves, goggles.
Note: Tegaderm is available on Resuscitation trolley.	For children with Patent Upper Airway, provided to parents on discharge.

Related internal policies, procedures and guidelines (if required)

[Tracheostomy Resuscitation](#) (Clinical Practice Manual)


References

1. National Tracheostomy Safety Project UK. Emergency Paediatric Tracheostomy Management. 2014. Accessed 15 March 2016. Available from <http://www.tracheostomy.org.uk/>
2. Russell C. Providing the nurse with a guide to tracheostomy care and management. [Expert opinion]. Brit J Nursing.14(8):428-433; 2005.
3. Wilson M. Tracheostomy management. [Expert opinion]. Paediatric Nursing.17(3):38-44; 2005.

Useful resources

- Royal Children’s Hospital, Melbourne. Continuum of care nursing standard; tracheostomy care of the paediatric patient. 2006.
- Children, Youth and Women’s Health Service; South Australia. CYWHS Nursing & Midwifery Clinical Standard Tracheostomy – Care of patient in the ward area. 2007
- Higgins D. Basic nursing principles of caring for a patient with a tracheostomy (Expert Opinion). 2009 Nursing Times; 105 (3): 14-15.

This document can be made available in alternative formats on request for a person with a disability.

File Path:			
Document Owner:	CNC Technology Dependent Children		
Reviewer / Team:	Resuscitation Committee; Clinical Deterioration Committee; ENT Surgeon; Technology Dependent Children; Paediatric Nursing Education;		
Date First Issued:	Jan 1974	Version:	3
Last Reviewed:	March 2016	Review Date:	March 2019
Approved by:	Chair, Clinical Deterioration Steering Committee	Date:	19 April 2016
Endorsed by:	PMH Patient Safety & Quality Committee	Date:	19 April 2016
Standards Applicable:	NSQHS Standards: 		

Printed or personally saved electronic copies of this document are considered uncontrolled