

P01.9 - EMERGENCY TRACH CARE / ENDOTRACHEAL TUBE INSERTION

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ACP ONLY ALL AGES

INDICATIONS

An obstructed tracheostomy that cannot be relieved by removing the inner cannula or by suctioning <u>and</u> a
replacement tracheostomy tube is not available

WARNINGS

Always keep emergency airway equipment close at hand

EQUIPMENT

- Personal protective equipment (PPE) including eye protection and nonsterile gloves
- Endotracheal tubes (ETT)
 - Current size
 - o One size smaller
- Water soluble lubricant
- 10 mL syringe
- Surgical tape
- Biohazard container
- Emergency airway equipment

PROCEDURE

- 1. Perform hand hygiene and don appropriate PPE.
- 2. Preoxygenate the patient if time allows.
- 3. Test the ETT cuff to ensure there are no leaks.
- 4. Apply lubricant to the tip and cuff of the ETT (DO NOT SPREAD LUBRICANT DOWN THE SHAFT).
- 5. Remove the securement strap or undo / cut the ties from the old TT. If the tube is cuffed and the cuff is inflated, deflate it with the syringe. Withdraw the old TT, following the curvature of the trachea (figure 1).
- 6. Gently insert the ETT into the stoma, again following the curvature of the trachea (figure 2). Insert so that the cuff is completely beyond the stoma, but short of the carina.
 - DO NOT FORCE THE TUBE if resistance is felt. If unable to insert the ETT, repeat the attempt with the smaller sized ETT.

- 7. Auscultate both lung fields to exclude right mainstem bronchial intubation (figure 3).
- 8. Inflate the ETT cuff with 5 ml of air. Listen for a cuff leak, and add air in increments of 1 ml if necessary to stop any audible leak air leak.
- 9. Attach the ETT by taping it to the patient's neck. Shorten the tube only if necessary to make it more secure for transport.
- 10. Remove PPE and repeat hand hygiene.
- 11. Discard all supplies into the biohazard container.

FIGURE 1	FIGURE 2	FIGURE 3

LINKS

- P01.7 Emergency Trach Care / Suctioning
- P01.8 Emergency Trach Care / Trach Tube Replacment

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VERSION CHANGES (refer to X03 for change tracking)

New