Emergency tracheostomy management - Patent upper airway

Call for Airway Expert help
Look, listen & feel at the mouth and tracheostomy
A Waters circuit or capnography may help assessment if available

Is the patient breathing?

No → Call Resuscitation team
CPR if no pulse

Yes → Apply high flow oxygen to **BOTH** the face and the tracheostomy

Assess tracheostomy patency

Remove **speaking valve** or **cap** (if present)
Remove **inner tube**
Some inner tubes need re-inserting to connect to breathing circuits

Can you pass a suction catheter?

Yes →
The tracheostomy is patent
Perform tracheal suction
Consider partial obstruction
Ventilate if not breathing
Continue ABCDE assessment

No →
Deflate the **cuff** (if present)
Look, listen & feel at the mouth and tracheostomy

Is the patient improving?

Yes →
Partially obstructed or displaced
Continue ABCDE assessment

No →
REMOVE THE TRACHEOSTOMY TUBE
Look, listen & feel at the mouth and tracheostomy. Ensure oxygen re-applied to face and stoma

Is the patient breathing?

No → Call Resuscitation team
CPR if no pulse

Yes → Continue ABCDE assessment

Primary emergency oxygenation

Standard **ORAL airway** manoeuvres
Cover the stoma (swabs / hand)
- Bag-Valve-Mask
- Oral or nasal airway adjuncts
- LMA

Tracheostomy STOMA ventilation
- Paediatric face mask applied to neck
- LMA applied to neck

Secondary emergency oxygenation

Attempt **ORAL intubation**
Prepare for difficult intubation
Uncut tube. Advance beyond stoma

Attempt **intubation of stoma**
Small trachy tube / 6.0 cuffed ETT
Consider Bougie / Aintree catheter / Fibre-optic 'scope