

This patient has a

TRACHEOSTOMY

There is a potentially patent upper airway (Intubation may be difficult)

Surgical / Percutaneous

Performed on (date)

Tracheostomy tube size (if present)

Hospital / NHS number

Notes: Indicate tracheostomy type by circling the relevant figure.
Indicate location and function of any sutures.
Laryngoscopy grade and notes on upper airway management.
Any problems with this tracheostomy.



Percutaneous



Björk Flap



Slit type

Emergency Call: Anaesthesia ICU ENT MaxFax Emergency Team

www.tracheostomy.org.uk

Emergency tracheostomy management - Patent upper airway

Call for airway expert help Look, listen & feel at the mouth and tracheostomy

A Mapleson C system (e.g. 'Waters circuit') may help assessment if available

Use **waveform capnography** when available: exhaled carbon dioxide indicates a patent or partially patent airway

Is the patient breathing?

Yes

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

Call Resuscitation Team
CPR if no pulse / signs of life

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?

NO

Deflate the cuff (if present)

Look, listen & feel at the mouth and tracheostomy
Use waveform capnography or Mapleson C if available

Yes

The tracheostomy tube is patent
Perform tracheal suction
Consider partial obstruction
Ventilate (via tracheostomy) if not breathing
Continue ABCDE assessment

Is the patient stable or improving?

NO

REMOVE THE TRACHEOSTOMY TUBE

Look, listen & feel at the mouth and tracheostomy. Ensure oxygen re-applied to face and stoma
Use Waveform capnography or Mapleson C if available

Call Resuscitation team
CPR if no pulse / signs of life

NO

Is the patient breathing?

Yes

Continue ABCDE assessment

Secondary emergency oxygenation

Attempt ORAL intubation
Prepare for difficult intubation
Uncut tube, advanced beyond stoma

Attempt intubation of STOMA

Small tracheostomy tube / 6.0 cuffed ETT
Consider Aintree catheter and fiberoptic 'scope' / Bougie / Airway exchange catheter

Primary emergency oxygenation

Standard **ORAL** airway manoeuvres
Cover the stoma (swabs / hand). Use:
Bag-valve-mask
Oral or nasal airway adjuncts
Supraglottic airway device e.g. LMA

Tracheostomy STOMA ventilation
Paediatric face mask applied to stoma
LMA applied to stoma