

Introduction to tube types and features



Tracoe have two ranges of tracheostomy tubes commonly used within the acute setting. There is Tracoe Twist and Tracoe twist plus. The life span of a Tracoe tracheostomy tube is **29 days**. At this point the tube must be changed and the used inner cannula discarded and replaced with new.

Twist ref.	Twist Plus ref.	Features
301	311	Cuffed and Non-fenestrated
302	312	Cuffed and fenestrated
303	313	Uncuffed and non-Fenestrated
304	314	Uncuffed and Fenestrated
306	316	Cuffed NON fenestrated extract (subglottic suction function)

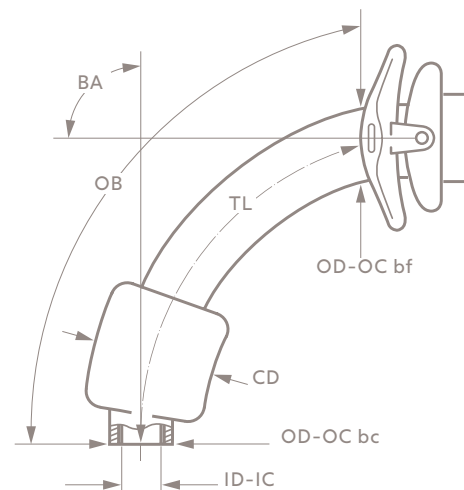
How to size a Tracoe tracheostomy tube

Tracoe tubes are conical meaning that the widest point is behind the flange and the narrowest point at the base of the cannula. When sizing tubes it's important to consider these dimensions- Inner diameter (I.D) Outer diameter at the widest point (O.D) and the Length.

Other manufacturers size tubes off the I.D of the outer cannula so once the inner is inserted you step down a size. This can impact on breathing resistance and weaning because the patient is breathing through a narrower lumen and the tube is occupying a large amount of the airway reducing airflow around.

Sizing

When sizing a Tracoe tube this is based off the I.D of the Inner cannula.



Description	Sizes
Tracoe Twist	4-10
Tracoe Twist Plus	7-10



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If a patient has a size 7 Tracoe Twist Plus in situ then the emergency size smaller is a Tracoe Twist Size 5. Please refer to table for dimensions.

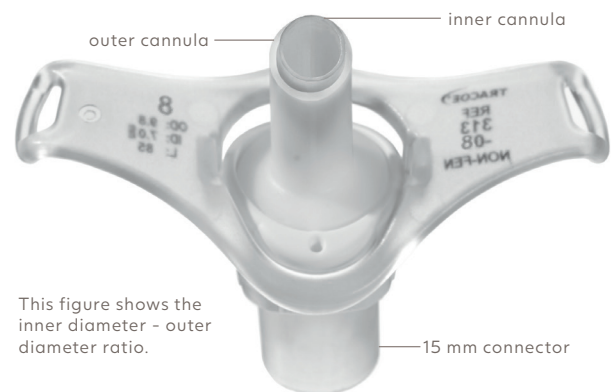
Features	I.D IC	O.D BF	O.D BC	Length
TT PLUS 7	7mm	10.1mm	9.8mm	85

Smaller size tube	I.D IC	O.D BF	O.D BC	Length
TT 5	5mm	10.1mm	8.6mm	66

Tracoe tracheostomy tubes have unique features such as:

Dual axis swivel Flange - this means the flange moves back and forth then side to side. The Flange also contains important information on the type, size and dimensions of the tube.

The writing on the flange is colour coordinated to indicate if the outer cannula is fenestrated or NON fenestrated.



Features of the Inner and Outer Cannulas

Green and White mean non-fenestrated



Green lettering on the neck flange indicates a non-fenestrated outer cannula.



Non-fenestrated Tracoe Twist inner cannulas are identified by white 15 mm connectors.



Non-fenestrated Tracoe Twist Plus inner cannulas are identified by a white locking ring.

Blue means fenestrated



Blue lettering on the neck flange indicates a fenestrated outer cannula.



Fenestrated Tracoe Twist inner cannulas are identified by blue 15 mm connectors.



Fenestrated Tracoe Twist Plus inner cannulas are identified by a blue locking ring.



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Depending on the tube being fenestrated or NON fenestrated dictates the type of inners included:



Non fenestrated will have 2 x non fenestrated inner

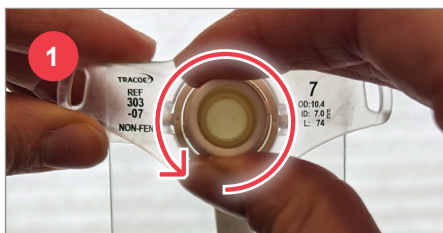


Fenestrated will have 1 x Fenestrated and 1 x Non fenestrated

WARNING:
You cannot put a twist inner in a plus tube and visa versa they do not interface across the ranges.

Removing the inner cannula

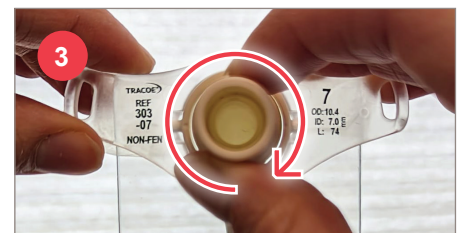
Tracoe Twist Locking Mechanism



To unlock the inner cannula grip the White or Blue 15mm connection and turn anti clock wise until it stops.

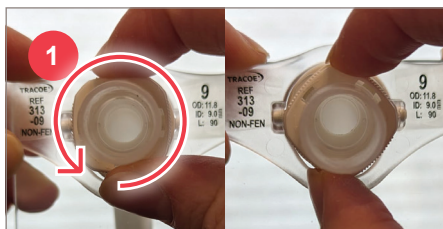


Gently pull inner towards you and it will slide out.



To lock inner. Insert cannula and rotate 15mm connection until it slots into a flush position with outer. Continue to turn clockwise until click is felt and you cannot turn any further.

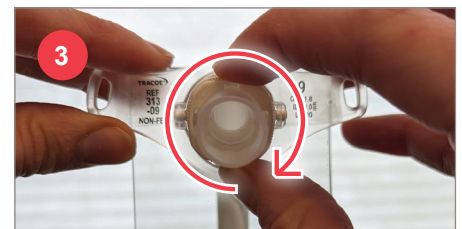
Tracoe Twist Plus Locking Mechanism



To unlock the inner cannula grip the White or Blue locking ring behind the 15mm connection. Turn anti clock wise until it stops. (ring will be in a diamond position).



Gently pull inner towards you and it will slide out.



To lock inner. Insert cannula and rotate locking ring until it slots into a flush position with outer (usually in a diamond position) then continue to turn clockwise until click is felt and you cannot turn any further. (square position).



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Care and management of Tracoe tubes

Cleaning of the inner cannula

To clean a Tracoe inner cannula it is advised to use swabs and sterile water. The cannula must then be left to air dry before it is reused. For heavily soiled cannula the Tracoe cleaning powder can be used to create a cleaning solution. It is important not to leave inner cannula soaking in water as this is an infection risk. It is good practice to inspect the inner before it is inserted into the outer cannula in the patient's airway.



Watch video
instructions here

Cuffed Tracheostomy tubes

All Tracoe cuffed tubes come with a High Volume Low Pressure Cuff. The safe pressure for a tracheostomy cuff is between 20-30 cmH₂O. To check cuff pressure a manometer is used. A syringe is used to deflate a cuff. Once there is resistance on the plunger this indicates complete deflation.

The cuff is made from a semi permeable material so on occasion moisture can be seen in the pilot balloon and line. This is normal and if it isn't affecting pressure readings on the manometer there isn't an issue. To resolve this the cuff will need to be deflated and the moisture withdrawn then the cuff can be re-inflated to a safe pressure. Please see the IFU for further assistance in this matter should it arise.



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Subglottic tubes - REF 306 + 316

These are known as Tracoe extract tubes. Accumulated secretions in the subglottic space can be suctioned off at the lowest point possible, above the low-pressure cuff. This reduces the risk of bacterially contaminated secretions passing into the lower respiratory tract. In the Tracoe twist and plus extract tubes, the opening of the subglottic suction channel is at the lowest point possible above the low-pressure cuff. The innovative, flat and stable suction channel provides a significantly improved suction performance. The larger flow cross-section and the lower suction point enable more efficient suctioning.



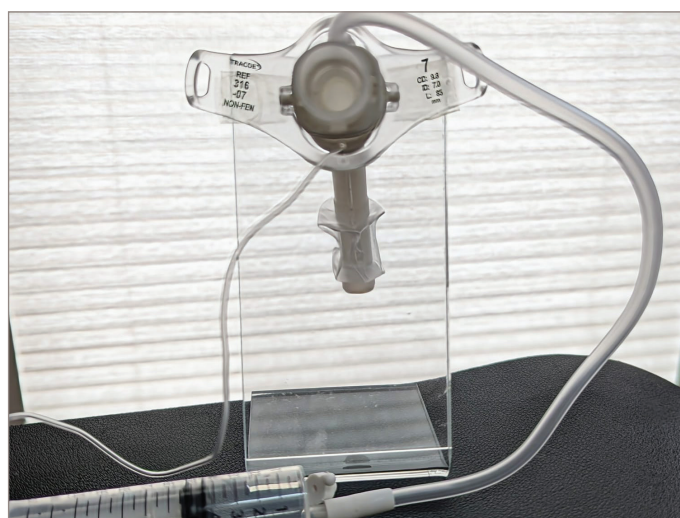
Product	Ref	Sizes
Tracoe Twist Extract	306	05 - 10
Tracoe Twist Extract-Fen	888-306	06 - 10
Tracoe Twist Extract-P	306-P	07 - 09
Tracoe Twist Extract-Fen-P	888-306-P	07 - 09
Tracoe Twist Plus Extract	316	07 - 10
Tracoe Twist Plus Extract-Fen	888-316	07 - 10
Tracoe Twist Plus Extract-P	316-P	07 - 10
Tracoe Twist Plus Extract-Fen-P	888-316-P	07 - 10

Using Subglottic suction ref 306 and 316 only

A 10 ml syringe is used to remove secretions from above cuff. Attach into the suction line and draw back to create a vacuum effect which should pull any debris through the line and off the cuff.

Alternatively vacuum suction may be used with the provided connectors and the luer lock connector closed at the end of suctioning.

The suction line may become blocked due to accumulated secretions or adhesions to the tracheal mucosa. You can attempt to clear the line by flushing it with a small amount of normal saline solution or air. Ensure beforehand that the cuff is sufficiently inflated to the correct pressure (please refer to IFU).



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