Tracheostomy Care at Home

This handout will cover routine tracheostomy (trach) care that should be done by those who have a trach tube in place or a stoma present.

Irrigation

You will need to clear your trach tube or stoma every day. This is called irrigating. It is done to help you keep your airway clear. Do this three times a day or more if needed. Do it when you feel that your airway is partly blocked or full of mucus. Doing this three times a day every day will keep your trachea moist and free from crust.

Trach Care With a Trach Tube in Place

1. Wash your hands before starting.

2. Draw up 3-5 mL of saline in your syringe and set aside.

3. Pour a small amount normal saline and the same amount of hydrogen peroxide into the container of your trach care kit.

4. Remove the inner cannula and place it in the solution of equal parts of normal saline hydrogen peroxide to soak. You must remove the inner cannula before irrigating to prevent mucus within the cannula from being pushed back into your lungs.

5. Take 2 slow, deep breaths in and out.

On the third deep breath, inject the syringe of saline into your trachea. This will make you cough up mucus through your trach. Make sure you have your Kleenex® ready in one hand.

6. Repeat these steps a second time. Even if you feel that you have cleared the mucus the first time, irrigate a second time. After the second time, if you still feel like you can’t clear the mucus, you keep irrigating until you feel clear.

7. With the brush supplied in the kit, clean out the inner cannula. Rinse it well with running tap water. If you have no water, use saline.

8. Shake the excess water off the inner cannula or use pipe cleaners to soak up the water.

9. Replace the inner cannula into the trach tube and lock it in place.

10. Change the trach ties as needed when they get dirty. You may need someone’s help with this.

11. After irrigating you will need to do trach site care, (see below).
Trach Care Without a Trach Tube in Place

1. Wash your hands before starting your care.

2. Draw up 3-5 mL of saline in your syringe and set aside.

3. Take 2 slow deep breaths in and out. On the third deep breath in, inject the syringe of saline into your trachea (stoma). This will make you cough up mucus through your stoma.

4. Repeat these steps a second time. Even if you feel that you have cleared the mucus the first time, irrigate a second time. After the second time, if you still feel like you can’t clear the mucus, keep irrigating until you feel clear.

Trach/Stoma Site Care

Be sure to make site care a part of your routine every time you clean your trach or stoma. Cleaning around your trach tube or stoma is the best way to prevent skin breakdown. Clean around the area with cotton-tipped swabs using mild soap and water or saline, if you have no soap and water. You can also use a washcloth. Make sure that it is clean and that you are able to reach under the faceplate of the trach tube, if you have one in place. If your nurse told you to use a gauze dressing around your trach tube, change it when you do site care or when it is soiled.

1. To make your own saline: Add 2 teaspoons of table salt to 1 quart of cool water that has been boiled for 3 minutes.

2. After being opened, saline may be kept in the refrigerator for 1 week. Date your bottle and discard it after 1 week.

3. Wash syringes, trach brush, cleaning trays, and containers with hot soapy water and rinse well after use. Use new items as needed.

4. Protect your stoma or trach with trach bibs to keep foreign material from being breathed into your lungs. This is very important when you are outside or taking a shower.

5. Irrigate more often if you get a cold to keep the mucus thin enough and easy to cough up.

6. If you have a trach tube in place and you can’t clear the mucus when taking the inner cannula out and irrigating, remove the entire trach tube and clean it.

7. If you have a trach tube and it must be taken out or it slips out of place by mistake, remove your inner cannula and insert your obturator. Place the trach tube with the obturator into your neck opening and fasten the ties. Remove the obturator and insert the inner cannula. The mucus may be blood-tinged for a day or two due to tissue irritation.

8. Humidity is a must. The air you breathe will no longer pass through the nasal passages which normally moisten the air and prevent mucous plugs from forming. Place a humidifier by your bed at night. Controlled humidity in the rest of the house is also helpful. Use of humidity is most important during the first month after surgery. You may also need to use more humidity during the winter.
When to Call Your Doctor

Please report any of these symptoms.

- Any pus-like, or increased drainage
- Increased redness around the trach site
- Pain that doesn’t get better with medicine
- Foul smelling drainage
- Temperature of 100.5° F (38.5° C)
- Any breakdown of skin around the trach, stoma, or suture lines
- Any airway problems after putting your trach tube in with the obturator

If you have any questions or problems once you are home, please call:

ENT Clinic, Monday-Friday 8:00 am to 5:00 pm, at (608) 263-6190

After 5:00 pm, weekends or holidays, this number will be answered by the paging operator. Ask for the ENT doctor on call. Leave your name, area code, and phone number. The doctor will call you back.

If you live out of the area, please call 1-800-323-8942.