**Emergency Airway Management (Conscious Child with Tracheostomy)**

Kids at home with trachs can often have trouble breathing when the trach becomes blocked with mucus or the trach comes out.

**Child is showing signs of respiratory distress**
- Increased work of breathing, respiratory rate, retractions
- Poor color, drop in oxygen levels
- Poor or no chest rise
- Whistling or wheezy sounds from trach
- Increased vocalization around trach tube
- Agitated/upset

**Always have essential equipment with your child at all times**
- Tracheostomy tube the same size as your child’s
- Trach tube one size smaller (emergency trach)
- Syringe (for cuffed tubes only) and lubricant
- Suction equipment and supplies
- Resuscitation bag, face mask, stoma mask
- Oxygen

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**Trach tube in**

- Suction/bag

- Can pass suction catheter to predetermined length and good chest rise
  - Respiratory distress continues?
    - ↑ O2 (Oxygen)
    - Saline drops and suction
    - Use broncho-dilators or Cough Assist if ordered
    - Bag and suction
    - Respiratory distress continues?
      - Change trach tube

- Cannot pass suction catheter to predetermined length or poor/no chest rise
  - Change trach tube

**Evaluate Situation**

- Check under the dressing to verify the trach is in the stoma.

**Trach tube out**

- Put in the same size trach

- Trach inserted
  - Support with blow-by oxygen to stoma or bag mask ventilate to face or stoma
  - Reposition for better stoma access. Helpful to spread stoma open with fingers.
  - Try inserting trach again. If trach cannot be inserted, try smaller emergency trach.

- Trach cannot be inserted
  - Support with oxygen/bagging/ventilator
  - Call 911

**Evaluate trach placement**

1. Chest rise?
2. Secretions/coughing
3. Can you pass suction catheter?
4. Is skin color or oxygen level good?

**Trach inserted**

If at any time your child loses consciousness, start CPR.