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

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

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

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

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

Trach tube out
- Put in the same size trach

Evaluate Situation
Check under the dressing to verify the trach is in the stoma.

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 blow-by O2 to stoma or bag mask ventilate to face or stoma
- Call 911

Unable to reinsert trach
- Support with oxygen/bagging/ventilator
- Call 911

If respiratory distress continues? Or you put in the emergency trach
- Call 911

Remove trach