When a Tracheostomy is Recommended for your Child

What is a tracheostomy?
A tracheostomy is a surgically made hole in the front of your child’s neck which creates an opening into the trachea (windpipe). This hole is called a tracheostomy stoma.

What is a tracheostomy tube (trach tube)?
A trach tube is a curved plastic or silicone hollow tube that is put in through the stoma and into the windpipe. Your child will breathe in and out through this breathing tube.

Location of a trach tube

A tracheostomy is a surgically created airway. Your child may need a tracheostomy to bypass a blockage of their upper airway. They may need a trach to be more safely connected to a breathing support device (ventilator) outside of the ICU or at home.
How is the decision made to place a trach in my child?
Your child’s doctors have recommended a tracheostomy. Common reasons a child needs a trach are when they:
• Cannot breathe because of blockage in the upper airway.
• Need help keeping their lungs and airways clear of mucus.
• Need a ventilator to help with breathing for a long period of time.
Your team will schedule a meeting called a care conference. At this important time, your provider will talk with you about why your child needs a trach tube and how long they anticipate your child’s needing it. The specialists likely involved in the discussion include:
• The otolaryngology surgeon - an airway specialist who will do the tracheostomy surgery and help care for the trach tube long-term.
• The pulmonary doctor - a lung and breathing specialist who provides the long-term care to children who need a ventilator to help them breathe.
• The craniofacial doctor - the head shape and airway specialist who provides long-term care to children who have facial differences.
• The critical care doctor or neonatologist – the person who leads a child’s care if they are in the ICU.
Before your child has a tracheostomy surgery, it is very important to us that you understand specifically how it will help your child.

What should I expect right after surgery?
Your child’s otolaryngology surgeon will place the correct size and type of trach tube during surgery. The new trach tube will be stitched into place for about 7 days to allow the stoma to heal properly. The tracheostomy stoma is not very painful, but your child may be given sedation medicines to treat the pain and keep them comfortable, if needed. Many children will be on a ventilator (a machine that helps them breathe) after the surgery. Often, the first trach tube has a cuff. The cuff is an inflatable area near the end of the trach tube. The cuff is used to help direct the breaths from the ventilator to your child’s lungs. After 7 days, the surgeon will remove the stitches and do the first trach change.

Where will my child go after surgery?
Your child will stay in the intensive care unit (ICU) until they are ready to be transferred to the medical floor. Before they can be moved from the ICU your child will need to have their first trach change, be medically stable and be set up and using their home equipment, including a home ventilator if necessary. It can sometimes take weeks after a trach tube is placed before your child is ready to leave the ICU. Before the transfer to the medical unit, you will have another care conference to make sure that the transition to the new floor and new care team goes smoothly. This will be a great opportunity to meet the new team and ask questions.

Watch these trach videos on GetWell TV at your bedside:
• Parent Talk
• The Basics
• Suctioning
• Daily Care
• Changing the Tube
• Troubleshooting
How will I learn to care for my child with a tracheostomy?

Our goal is for your child to go home with you after they are medically ready and you have learned how to care for them with a tracheostomy. There are many tasks for you to learn to keep your child safe and healthy with a tracheostomy. We understand being told your child needs a trach involves a lot of adjustment for you and your child. Your child’s care team including Child Life and Social Work will support you all throughout this time. Our respiratory discharge educators will meet with you to set up a training schedule when your child is medically ready for training to begin. While your child is in the ICU you can watch all 6 of the trach videos anytime on the Get Well Network in your child’s room. We will give each one of our family caregivers a Tracheostomy Handbook with all of our handouts that we use during our trainings. We also have loaner trach dolls for you to take home for more practice.

Your child will have several types of medical equipment in the home, including oxygen and oxygen monitors, suction machines for keeping the airway clear, and a ventilator (if necessary). Children with a tracheostomy must have an awake, trained caregiver with them 24 hours a day, which means that they qualify for nursing in the home. Our care coordinators will meet with you to discuss how we will work to get these things started around the time of the tracheostomy surgery.