Tracheostomy Stoma Care and Tracheostomy Tube Changes

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Topics

• Tracheostomy stoma care and tie change procedure
• Assessment of tracheostomy stoma site
• Routine tracheostomy tube changes

Tracheostomy Stoma Care

• Purpose: prevention of stoma infections and granulation tissue formation
• Clean procedure done daily and as needed
• No powders or ointment around the stoma
• Tie change usually done after stoma care
• The ties can be changed every 2-3 days if clean and dry
Two persons are required for a safe tracheostomy tie change:
- one to hold the trach
- one to change the ties

Tracheostomy Stoma Care Supplies

- Cotton tip applicators or clean washcloth
- Cloth with mild soap and water
- Container with ½ strength hydrogen peroxide and water, if crusty, dried secretions
- Trach dressing, if used
- Trach ties—twill or Velcro
- Scissors
- Clean gloves

Trach Stoma Care

- Assemble all needed supplies before starting
- Position the child with roll under shoulders to visualize stoma:
  - Swaddle infant for better control
- Apply clean gloves
- Remove soiled dressing

Revised and adapted from http://www.angelfire.com/va2/trachties/Trachcare.html
Trach Stoma Care

- Swab or wash with clean cloth around the stoma moving away from the stoma
- If ties changed, the 2nd person holding the tracheostomy tube, remove the soiled ties, wash the neck
- Place a clean dressing (if used) under the tracheostomy tube flanges
- Replace the tracheostomy ties; check for tightness

Retrieved from: http://www.ich.ucl.ac.uk/factsheets/families/F000305/trac2.html

Tracheostomy Tube Ties

Twill tape:
- Width of tie important to prevent ulceration of skin
- Use for children who can release Velcro ties
- Need to rotate knot to prevent irritation

Velcro tracheostomy ties: Easy to apply, soft

Checking Tightness of Trach Ties

- Check tightness of ties
  - with the child lying down
  - also in a sitting position

- Should be able to get one finger under the tie

- Pull slightly on the tracheostomy tube connector
  - should be a small amount of space between the trach tube and the skin
Trach Site Assessment: Skin
- Trach stoma and surrounding skin color
- Note any granulation tissue
- Note any drainage or swelling
- Note the skin condition under the trach ties
  - look for excoriation, rashes, or any skin breakdown

Trach site assessment: Granulation Tissue
- Tracheostomy granuloma occurs as result of:
  - surgery,
  - infection or irritation
- Is red in color and bleeds easily
- Does not contain nerves - not painful

Trach site assessment: Granulation Tissue
- Can grow in size and occlude the stoma
- If granuloma is present, notify the MD so early treatment can occur
- Treatment can include:
  - application of silver nitrate
  - and/or use of steroid cream


Used with permission from Kerry Baldwin
www.tracheostomy.com

Boskos and Cotton, J Respir Dis Pediatrics 2003; 5:201
Trach site assessment: Yeast infection

- Yeast: infection that can be found around the trach
- Notify MD for treatment plan
- Treatment: Nystatin® cream to area; if on neck, use Nystatin® powder

Trach stoma assessment: Dermatitis

- Contact dermatitis: inflammation resulting from secretions or moisture around the stoma
- Treatment includes:
  - Keeping the area dry
  - Avoid gauze dressings which hold moisture
  - Use Lyofoam® or Mepilex® to keep area dry
  - May use steroid cream
  - If infected, antibiotic cream

Tracheostomy Dressings

Mepilex® Absorbent Dressing
Soft absorbent dressing with silicone layer. Adheres to the skin without pulling skin when removed

Lyofoam® Absorbent Dressing
www.convjecta.com
Soft absorbent polyurethane dressing does not adhere to the skin
### Routine Tracheostomy Tube Change

| Frequency: | At a minimum uncuffed tubes changed weekly cuffed tubes changed as ordered by the MD |
| Purpose: | Maintains tracheal stoma integrity of the trach tube |
| Each nurse who cares for children with a tracheostomy needs to do a trach tube change at least once every six months |

### Equipment Preparation for Trach Change

- 2 person procedure, unless an emergency
- Have two trach tubes available—one the current size and one a size smaller
- Have a manual resuscitation device and mask available
- Prepare new tube with ties attached, obturator in place and a lubricated tip

### Equipment for Trach Tube Change
Preparing Child for Tracheostomy Tube Change

- NPO for at least one hour before change
- Tell the child what you are going to do
- Suction prior to trach change to clear the airway
- Position with roll under shoulder; swaddle infant/young child to provide control
- If on a ventilator, provide breaths with manual resuscitation device prior to and after trach change until back to baseline

Trach Tube Change

Video Placeholder
Your video will display here.

Key points: Trach Care and Trach Change

- Trach stoma care is done daily; trach tie changes can be done daily or q 2-3 days if clean and dry
- Trach tie changes and routine trach tube changes are 2-person procedures due to risk of complications
- Routine tracheostomy tube changes are done weekly; cuffed tracheostomy tube changes are based on MD order