

My Questions

If you have any questions about tracheostomy tubes, please ask a member of the healthcare team. We will be happy to answer your questions.

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This information does not replace the advice given to you by your healthcare provider.

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To order: patienteduc@fraserhealth.ca

Tracheostomy

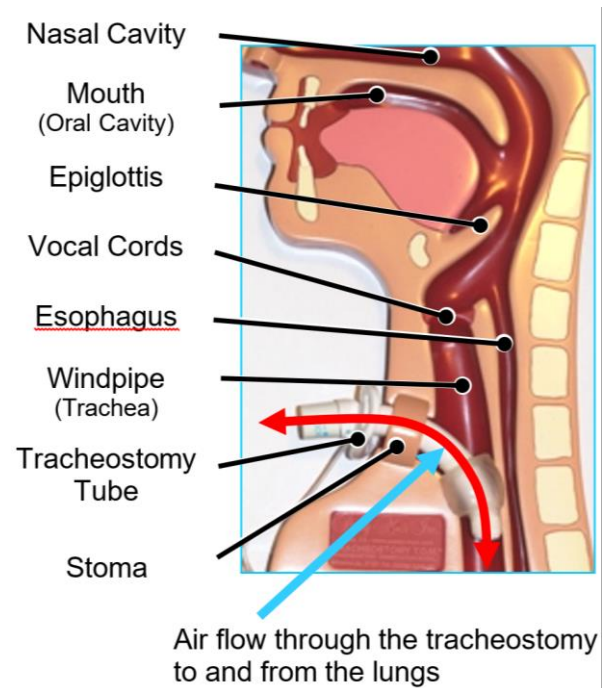


What is a tracheostomy?

It is an opening (ostomy) made through the skin of the neck into the windpipe (trachea – say *tray-kee-yah*).

What is a tracheostomy tube?

A hollow, plastic tube placed through the opening in the trachea to hold it open. You will hear us call this a 'trach tube' (say *trayk*).



Why is the tube needed?

There are many reasons why a person might need a tracheostomy tube.

Some common reasons are:

- The person needs ongoing help to breathe. If the person continues to need a breathing machine (ventilator) to help breathe, the tube is more comfortable than having a breathing tube in through the mouth.
- The person has lots of mucous and secretions in the lungs. The tracheostomy tube allows us to easily suction to clear the airway.
- The person needs their airway kept open. Maybe they are not awake enough to keep it open or not able to protect their own airway.
- The person's upper airway is or could be blocked by swelling or a tumour.

Who puts the tube in place?

The tube could be put in place by a doctor in the Intensive Care Unit or a surgeon in the Operating Room. The doctor and the surgeon are both specialists in placing tracheostomy tubes.

Is the tube permanent?

The tube is not always permanent. It could be taken out once the person is awake, can breathe adequately on their own, and is able to cough and clear secretions on their own.

Once it is removed, we place a bandage over the opening (called a stoma). This closes and heals over time, leaving only a small scar on the neck. We call the taking out the tube 'decannulation'.

If a person needs the tube for longer, we talk with them and their family about next steps. We teach both the person and their caregivers how to care for the tube and how to carry one with everyday life. We want to make sure everyone involved is confident in taking care of the tube so they can be as independent as possible.

Who takes care of the tube?

Your nurse and respiratory therapist share the responsibility for caring for your tube while you are in the hospital.

Care of the tube includes daily cleaning of the tube and the skin around the tube. They also suction the tube when needed.

If still needed when you are well enough to leave the hospital, you and/or your caregivers continue to care for the tube.