



## **PATIENT INFORMATION**

# Care of your Tracheostomy

Your tracheostomy is a hole (stoma) in the trachea (windpipe) through which a tube has been passed. This artificial airway allows you to breathe through the tube. The most common reason for performing a tracheostomy is to bypass an upper airway obstruction. It is important that you, or your carer, learn how to care for the tracheostomy tube and the skin around your stoma. The nurses on the ward and your specialist nurse will help you to feel confident about doing this on your own.

### **Care of the skin**

It is important to keep the skin around the tracheostomy clean. Initially you may need to clean the area several times a day, but once a day will probably be sufficient eventually.

- Always wash your hands before performing any care.
- Use warm water and gently wipe the skin with gauze or cotton buds. Never use cotton wool as the fibres can enter your tube and make you cough.
- After cleaning gently dry the area.
- Do not use highly perfumed lotions or creams without checking with your doctors or specialist nurse.
- Store your cleaning equipment in a sealed plastic container to keep it away from dust and dirt.
- If the skin around your tracheostomy becomes sore or red please contact your specialist nurse.

### **Care of the tube**

The inner tube has been designed to be cleaned and reused. It is important to keep it clear from secretions and it may be necessary to clean it several times each day.

- Wash your hands.
- Holding the neck plate of the tube, unlock the inner tube by turning it towards your right shoulder (if you are looking in the mirror this is in a clockwise direction).
- Still holding the neck plate, remove the inner tube by pulling it outwards and downwards.
- Rinse the tube in a bowl of cooled, previously boiled water, if the secretions are sticky rinse in a solution of a teaspoon of sodium bicarbonate in a pint of warm water. After a few minutes soaking gently remove secretions with a foam stick.

- Rinse thoroughly with water and dry with clean gauze.
- To reinsert the inner tube push it into the outer tube while holding the neck plate steady with the other hand. Be sure you have locked it back into position towards your left shoulder.
- Do not attempt to change the outer tube without further specialist instructions. You will be given an outpatient appointment to change the tube once a month.

**If at any time you are unable to remove or reinsert your inner tube please contact your specialist nurse or Forrest Ward for advice.**

### **Changing the tapes**

Tracheostomy Velcro tapes should be changed when they become soiled. You will need someone to help you with this procedure.

- Wash your hands.
- Remove a new tape from its packaging.
- Remove the old tape, holding the neck plate of the tube firmly in place.
- Place one end of the new tape through the hole in the neck plate and secure the Velcro.
- Do the same on the other side.
- Secure the new tape by sealing the Velcro at the back of your neck. The tape should be just tight enough to secure the tube in place, but loose enough to allow 1 finger to be inserted between the neck and the tape.

**If at any time you think you may have dislodged or moved the tube please contact your specialist nurse or Forrest Ward immediately for advice**

**If at any time you have any concerns or questions about your tracheostomy please contact your specialist nurse or Forrest Ward**

Make of tube.....  
 Size.....  
 Type.....  
 Date inserted.....

**Contacts:**

- Head and Neck Specialist Nurse ☎ (01803) 655044
- Forrest Ward ☎ (01803) 655507
- CancerBACKUP ☎ 0808 800 1234 website [www.cancerbackup.org.uk](http://www.cancerbackup.org.uk)