

Suctioning-Advanced



Clinical Indications:

 Obstruction of the airway (secondary to secretions, blood, or any other substance) in a patient currently being assisted by an airway adjunct such as a naso-tracheal tube, endotracheal tube, Combitube, King LTD, tracheostomy tube, or a cricothyrotomy tube.

Procedure:

- 1. Ensure suction device is in proper working order.
- 2. Preoxygenate the patient as is possible.
- 3. Attach suction catheter to suction device, keeping sterile plastic covering over catheter.
- 4. Using the suprasternal notch and the end of the airway into which the catheter will be placed as guides, measure the depth desired for the catheter (judgment must be used regarding the depth of suctioning with cricothyrotomy and tracheostomy tubes).
- 5. If applicable, remove ventilation devices from the airway.
- 6. With the thumb port of the catheter uncovered, insert the catheter through the airway device.
- 7. Once the desired depth (measured in #4 above) has been reached, occlude the thumb port and remove the suction catheter slowly.
- 8. A small amount of Normal Saline (10 ml) may be used if needed to loosen secretions for suctioning.
- 9. Reattach ventilation device (e.g., bag-valve mask) and ventilate the patient
- 10. Document time and result in the patient care report (PCR).

Certification Requirements:

Maintain knowledge of the indications, contraindications, technique, and possible complications of the procedure. Assessment of this knowledge may be accomplished via quality assurance mechanisms, classroom demonstrations, skills stations, or other mechanisms as deemed appropriate by the Survival Flight Medical Director.