

Centre universitaire  
de santé McGill



McGill University  
Health Centre



# Tracheostomy Care

For patients and families

A patient-friendly booklet for:

*This booklet is to inform you about your tracheostomy and how to care for it at home. Take your time and write down any questions or concerns that you and your family may have and talk to us about them.*

## ● Contents

<b>Tracheostomy Tube Important Information</b> .....	<b>2</b>
<b>Contact Numbers</b> .....	<b>2</b>
<b>Your Healthcare Team</b> .....	<b>3</b>
<b>What is a Tracheostomy?</b> .....	<b>4</b>
Reasons why you need a tracheostomy tube .....	5
How does your breathing change .....	5
Parts of a tracheostomy tube .....	6
<b>Getting Ready to Go Home</b> .....	<b>7</b>
<b>Caring for Your Tracheostomy</b> .....	<b>11</b>
Clearing secretions from your tracheostomy tube .....	12
Suctioning .....	12
Cleaning your inner cannula .....	16
Caring for your stoma .....	20
Changing the tracheostomy ties .....	23
<b>Living with a Tracheostomy</b> .....	<b>25</b>
Humidification .....	25
Bathing .....	26
Swimming .....	27
Eating .....	27
Mouth care .....	28
Clothing .....	28
Precautions to take (i.e., dust, water, perfume) .....	29
Illness: cold and flu .....	30
Washing your hands .....	30
Smoking cessation .....	30
Medication .....	30
<b>Communication</b> .....	<b>31</b>
<b>Problem-solving — What to do if:</b> .....	<b>33</b>
<i>“I have a hard time breathing.”</i> .....	33
<i>“I simply can’t breathe through my tube.”</i> .....	33
<i>“My tracheostomy tube comes out.”</i> .....	34
<b>CPR on a Tracheostomy Patient</b> .....	<b>34</b>
<b>Support and Community Resources</b> .....	<b>35</b>
<b>Additional Medical Supplies</b> .....	<b>36</b>
<b>Appendix 1</b> .....	<b>37</b>
<i>How to make your own distilled water</i> .....	37
<b>Acknowledgements and authors</b> .....	<b>39</b>

## ● Tracheostomy Tube Important Information

Size and model	
Date last changed	
Date to be changed	

## ● Contact Numbers

Local CLSC Number	
Emergency Numbers	
Advanced Practice Nurse	
Department of Speech-Language Pathology	RVH: 514-934-1934, ext. 48028

## ● Your Healthcare Team

During your stay at the hospital, you will be cared for by a team of professionals. They will be teaching you about the care you will need to learn before your discharge home. Please do not be afraid to ask someone who they are and what they do. They are all here to work with you and your family to provide the best possible care.

Having a tracheostomy tube at first can be a very difficult time for you and your family. This booklet was created to give you some important information about how to care for your tracheostomy tube and the support resources available to you.

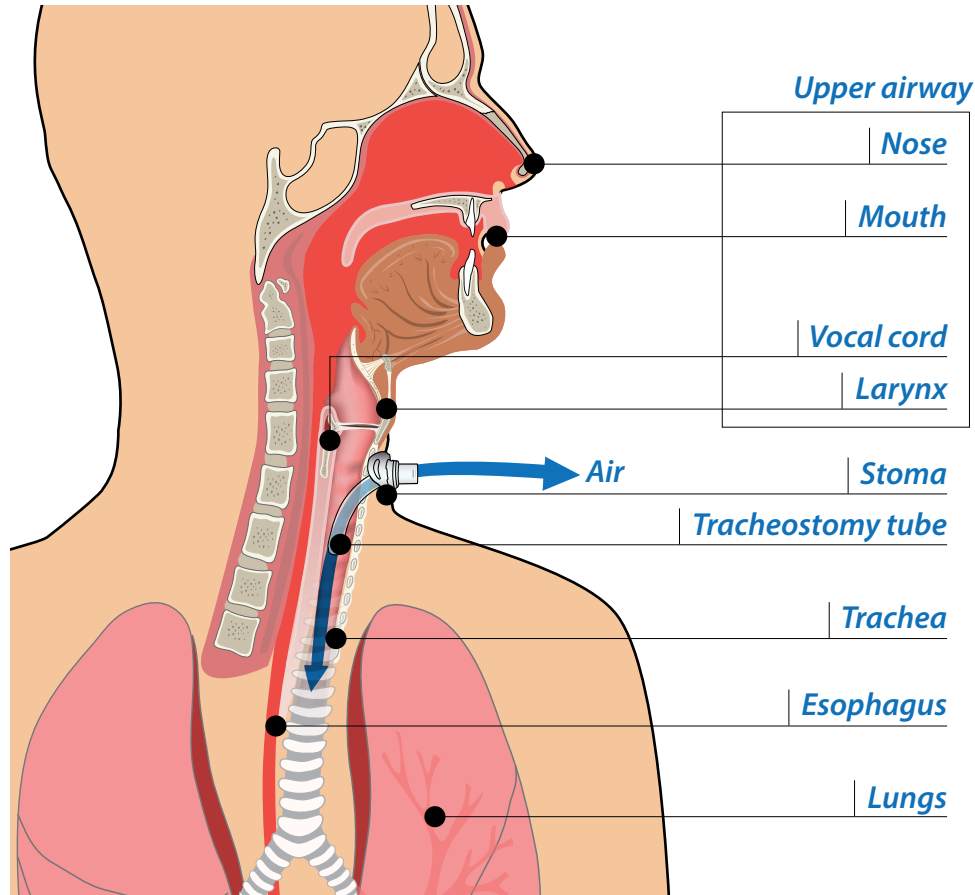
Please share your worries, fears and feelings with your medical team so that they can best meet your needs. Together, we are a team to help ensure that the best possible care is being given to you and your family members.

Sincerely,  
**The McGill University Health Centre's Interdisciplinary  
Healthcare Team caring for patients with tracheostomy tubes**



## What is a Tracheostomy?

A tracheostomy or trach is a surgical opening made into the trachea (windpipe), to help you breathe easier. This opening is called a stoma. A tracheostomy tube or “trach tube” is placed into the stoma to keep it open. The tracheostomy tube allows you to breathe in air directly into your windpipe instead of through your mouth and nose. A tracheostomy can be permanent or temporary.

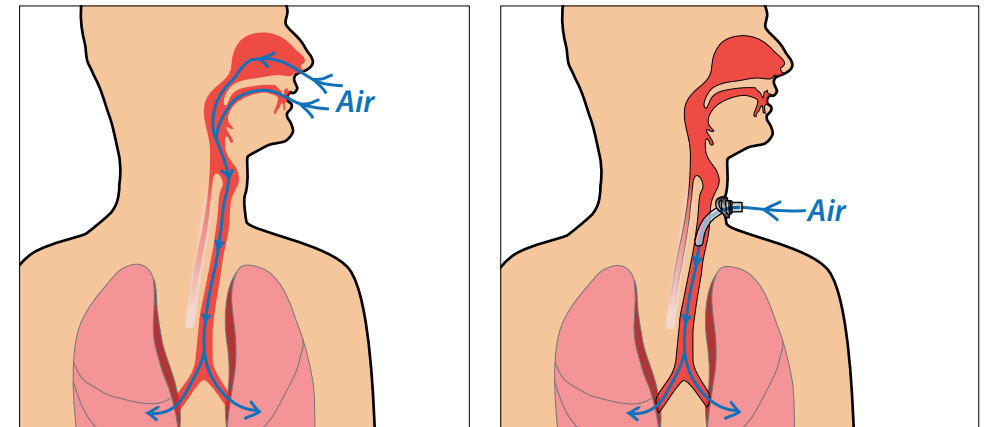


## Reasons why you may need a tracheostomy tube

### The most common reasons are:

- |   |   |
|---|---|
| → To avoid a blockage in your upper airway  | → To help you if you are on long-term ventilation |
| → To keep your airway open if you are badly injured or are having an airway procedure |   |
| → To protect your airway  |   |

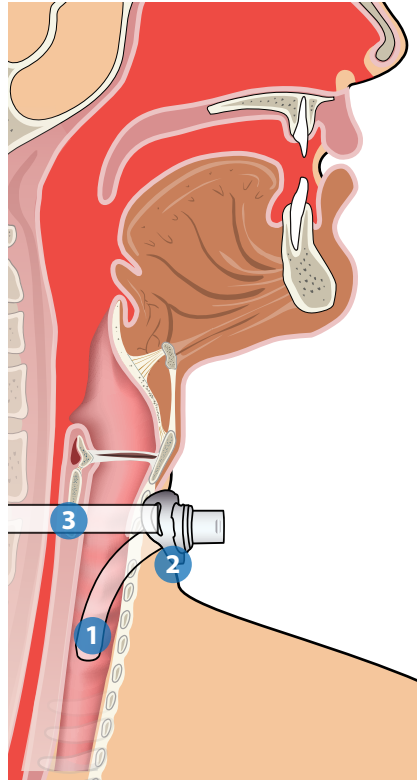
## How does your breathing change?



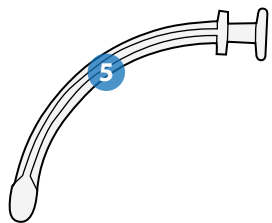
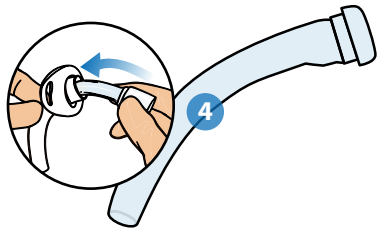
When you have a tracheostomy tube, you are no longer breathing through your nose or mouth. Instead, the air you are breathing goes through your tracheostomy tube directly into your windpipe and then your lungs.

The function of your nose and mouth is to warm, filter and add moisture to the air you breathe. Since you are no longer breathing through your nose or mouth, you will need to find a different way to warm, filter, and add moisture into the air you breathe. This booklet will help give you tips as to how to do this.

## Parts of a tracheostomy tube




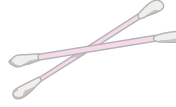

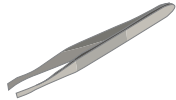

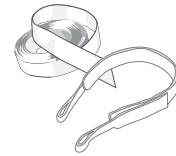




1	The <b>outer cannula</b> is a tube that fits into the trachea and keeps the stoma open during healing. The outer cannula stays in place at all times. It is replaced as recommended by your medical team.
2	The <b>tracheostomy plate</b> extends from the sides of the outer cannula. It has holes where you will place your tracheostomy ties.
3	The <b>tracheostomy ties</b> (velcro straps) wrap around your neck. They prevent the tracheostomy tube from falling out.
4	The <b>inner cannula</b> locks inside the outer cannula. It has a lock to keep it from being coughed out. It is removed for cleaning to make sure that the airway is clear of secretions.
5	The <b>obturator</b> is included in your kit and is only used by your doctor for insertion of your tracheostomy tube. It fits inside the outer cannula to provide a smooth surface that guides the tracheostomy tube being inserted.





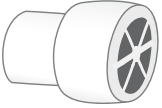
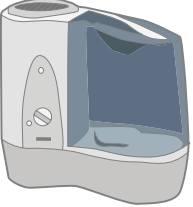
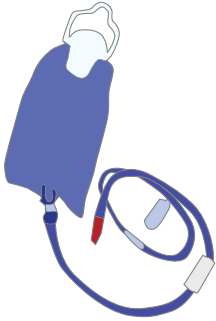
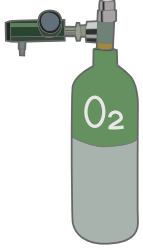
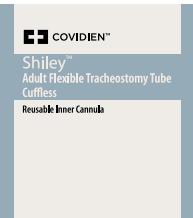
## Getting Ready to Go Home

Before you leave the hospital you and a family member will be taught how to care for your tracheostomy tube. Please share your worries, fears, and feelings with the healthcare team. Practice caring for your tracheostomy tube before going home. Be sure you are comfortable caring for your tracheostomy tube. We are here to help you.

There are a few supplies that you will need at home to care for your tracheostomy tube. Keep all supplies in one place and set them up before use.

For tracheostomy care	
 <p>Tracheostomy brush</p>	 <p>Cotton-tipped swabs (e.g., Q-Tips®)</p>
 <p>Gauze</p>	 <p>Tweezers</p>
 <p>Scissors</p>	 <p>Trach ties</p>
 <p>Mild fragrance-free liquid soap (e.g., Dove® or Ivory®)</p>	 <p>Hydrogen peroxide 3%</p>
 <p>Normal saline or distilled water (see Appendix 1 for "How to make your own distilled water")</p>	 <p>2 clean bowls</p>

Your healthcare team will help you organize your supplies at home before you leave the hospital. Your home care nurse will contact your local CLSC. A CLSC nurse will visit you at home after discharge. They will make sure that you have the required supplies. They will support you in the care of your tracheostomy tube.

For daily living	
Shower shield 	Trach bib 
Speaking valve or other communication options 	Humidifier 
Enteral feeding supplies (if required) 	Oxygen (if required) 
	Extra trach tube box of same size 

## Supplies for you to buy

### For general tracheostomy care

→ From a pharmacy/ general store

- 2 clean bowls (used only for tracheostomy care)
- 2 clean face cloths (used only for tracheostomy care)
- Normal saline or distilled water  
(see appendix 1 for "How to make your own distilled water")
- Mild fragrance-free liquid soap (e.g., Dove® or Ivory®)
- Hydrogen peroxide 3%
- Scissors
- Tweezers
- Humidifier
- Gloves (as needed for caregivers)

### Additional supplies for the care of your tracheostomy

→ From a medical supply store (see page 36)

- Tracheostomy Velcro ties
- Heat and moisture exchanger (HME)

Supplies that may be given to you	
<b>Organized by the Home Care Liaison Nurse</b>	
→ From Centre hospitalier de l'Université de Montréal (SAL-PAC)	
<input type="checkbox"/> Trachestomy ribbon (cotton trach ties)	<input type="checkbox"/> Drain sponges (Trach dressing)
<input type="checkbox"/> Trachestomy brush	<input type="checkbox"/> Non-sterile sponges (gauze)
<input type="checkbox"/> Normal saline	<input type="checkbox"/> Trachesotomy bib
→ From Association québécoise des laryngectomisés	
<input type="checkbox"/> Shower shield (first shower shield is free of charge)	
→ From Service Régional de Soins à Domicile (SRSAD) du CIUSSS de l'Est de l'Île de Montréal	
<input type="checkbox"/> Suction machine	<input type="checkbox"/> High humidity machine (if required)
<input type="checkbox"/> Suction catheters	<input type="checkbox"/> Oxygen (if required)
<b>Organized by your Speech-Language Pathologist</b>	
→ From Centre hospitalier de l'Université de Montréal (SAL-PAC)	
<input type="checkbox"/> Speaking valve/communication devices	
<b>Organized by your Nutritionist</b>	
Tube feeding (if applicable)	
<input type="checkbox"/> Formula	<input type="checkbox"/> Intravenous pole
<input type="checkbox"/> Equipment	<input type="checkbox"/> Feeding pump

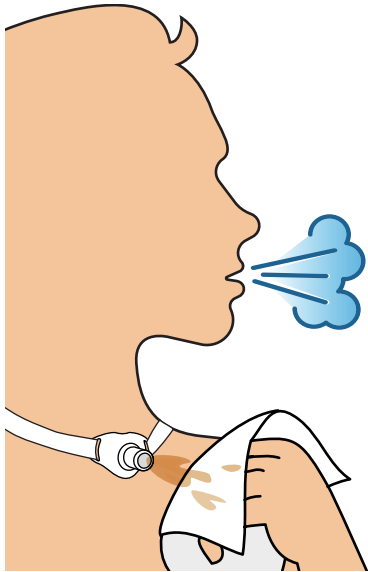
Please see "Support and Community Resources" section on page 35 for more information.

## — Caring for Your Tracheostomy

Once you're back home, you can do your own tracheostomy care using a "clean technique". It is extremely important to carefully wash your hands before and after caring for your tracheostomy tube. If someone else is doing the care for you then they must wear gloves.

Steps to properly wash your hands	
1	Wet your hands with lukewarm water.
2	Apply soap and rub your hands together for 15 to 20 seconds.
3	It is important to thoroughly soap all surfaces of both hands: your fingers, between your fingers, your thumbs, your palms, the back of your hands, and your nails.
4	Rinse your hands with running water.
5	Dry your hands with a paper towel, a clean cloth towel, or a hand dryer.
6	Turn off the tap with the paper towel, if available.





### Clearing secretions (mucus) from your tracheostomy tube





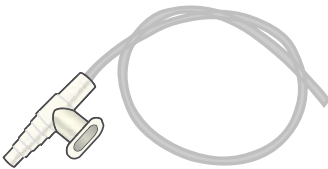
It is important to keep the tracheostomy tube clean from thick secretions. Clearing secretions from your tracheostomy tube should be done as often as needed and before cleaning your inner cannula.

- Take a deep breath while closing your mouth.
- Give a strong cough. Secretions may come out of your tracheostomy tube and/or your mouth.
- Use a tissue to catch or wipe your secretions, if needed.

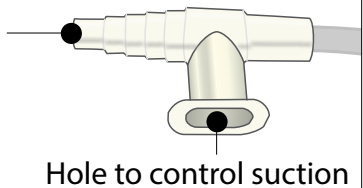
### Suctioning

If you cannot cough up your secretions or have trouble breathing you may need to suction yourself or have someone else suction your tracheostomy tube to clear the secretions. Someone will come to your home to show you how to set up your suction machine and material.


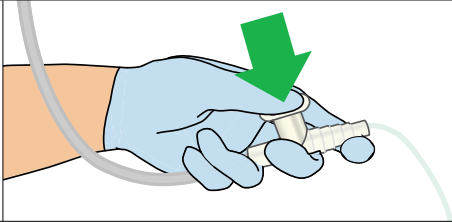
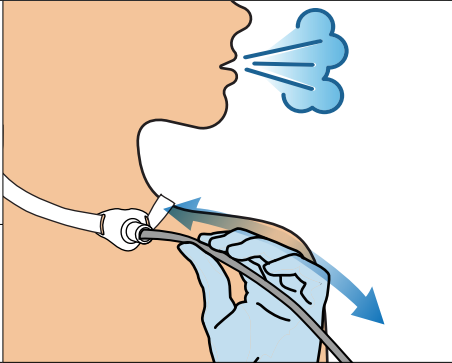

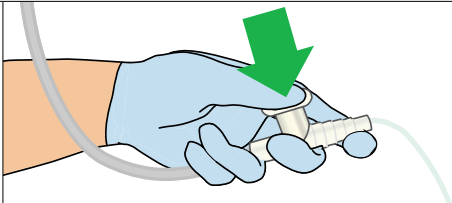
#### For suctioning you will need:

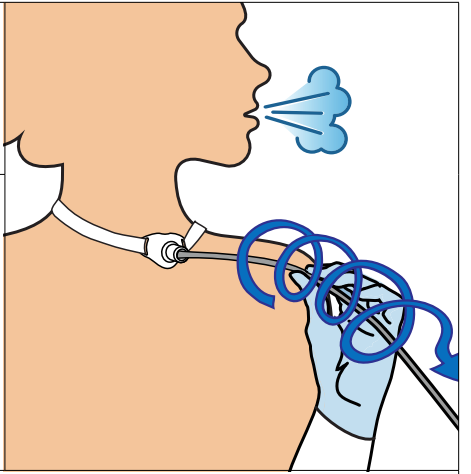
<p>Clean bowl</p> 	<p>Normal saline or distilled water (see Appendix 1 for "How to make your own distilled water")</p> 	<p>Non-sterile gloves</p> 
<p>Suction machine</p> 	<p>Suction catheter</p> 	

#### Steps to suctioning

1	Wash your hands.	
2	Set up your suction machine and suction material as per the company's user manual.	
3	Pour normal saline-distilled water into a bowl.	
4	Sit upright and try to cough hard, this will help move the secretions up the airway.	
Put on gloves (if someone else is doing the suctioning).		
5	Attach suction tubing to the end of the suction catheter and slide the catheter out from the protective package.	
6	With your non-dominant hand, hold the end of the suction catheter where the hole to control suction is located.	









7	With your dominant hand (the hand you write with), hold the suction catheter 5-7 cm from the tip.	
8	Place tip of suction catheter into normal saline or distilled water to test level.	
9	Put your thumb over the hole to control suction for a few seconds to test the level of suction of your suction machine.	
10	Gently insert the suction catheter into the tracheostomy tube until you feel resistance or until you start to cough.	
 <b>Do not apply suction during insertion.</b>		
11	Pull back on the catheter slightly before suctioning.	
12	Put your thumb over the hole to control suction to create a vacuum and start suction.	

13	<b>COUGH!</b>	
14	While pulling back on the suction catheter in a circular motion, keep your thumb on the hole to control suction for a maximum of 10 seconds.	
15	Rinse the suction catheter with normal saline or distilled water.	
16	Sit back, relax, and take a few deep breaths.	
17	You may repeat these steps until you feel as though you have removed most of the secretions and can breathe easier.	
18	Remove gloves and wash your hands.	
19	Clean your suction machine as per the company's user manual.	



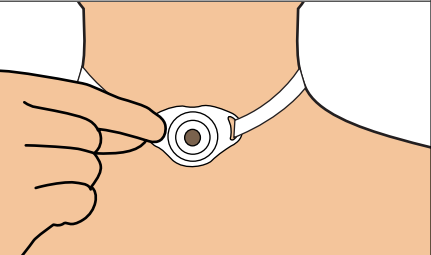
**Talk to your health care team if you are not able to clear your secretions.**

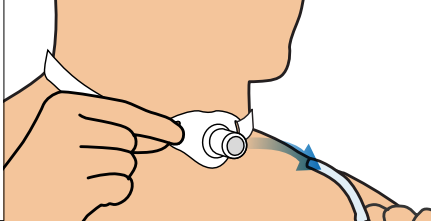
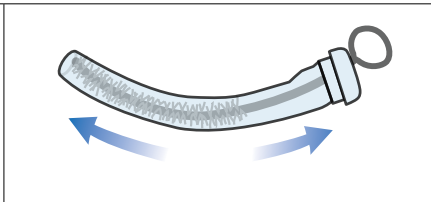
## Cleaning your inner cannula

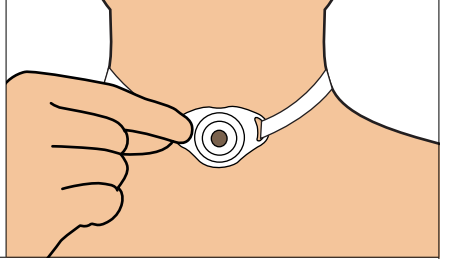
Cleaning the inner cannula of your tracheostomy tube is an important task. It should be done at least two times a day (morning and night), or more often if needed, to keep the tube clean and free of secretions.

To clean your inner cannula you will need:	
 Tracheostomy brush	 2 Clean bowls
 Mild fragrance-free liquid soap (e.g., Dove® or Ivory®)	 Hydrogen peroxide 3%
 Normal saline or distilled water (see Appendix 1 for “How to make your own distilled water”)	 Tap water

## Steps to clean your inner cannula

<b>1</b>	Wash your hands.	
<b>2</b>	Place the material on a clean area.	
<b>3</b>	Pour the tap water and mild liquid soap into one of the bowls. If the secretions are thick and sticky add ½ cup of hydrogen peroxide 3% into the same bowl.	
<b>4</b>	Pour the rinsing solution (normal saline or distilled water) in other bowl.	
<b>5</b>	With your non-dominant hand — the hand you do not write with — hold the tracheostomy plate in place with your thumb and index.	

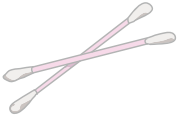
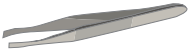


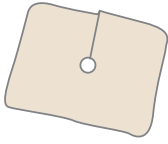
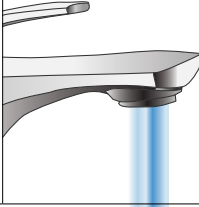
6	Continuing with your dominant hand, unlock the inner cannula by gently pinching the sides of the tip of the inner cannula together.	
	Remove the inner cannula by pulling it out and downward.	
7	Place the inner cannula into the bowl with the mild liquid soap and water.	
8	With the tracheostomy brush, clean the inside and the outside of the inner cannula to dislodge the mucus.	
9	Rinse the inner cannula in the normal saline/ distilled water bowl.	
10	Make sure the tube is clear. If it is not, repeat steps 8 to 10.	
11	Gently shake the inner cannula to remove as much liquid as possible.	

12	Hold the tracheostomy plate with the thumb and index fingers of the non-dominant hand to hold it in place.	
13	Reinsert the inner cannula into the outer tube with your dominant hand and lock it by gently pushing the inner cannula, without pinching the sides together, until you feel a "click".	
14	Wash all the bowls thoroughly and leave to dry in a clean place. Clean the tracheostomy brush with hydrogen peroxide 3% and rinse with tap water and leave to dry.	
15	Wash your hands.	

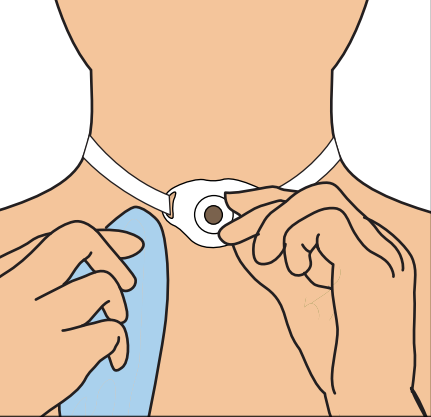

## Caring for your stoma

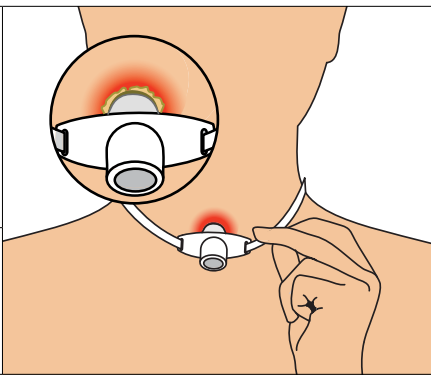
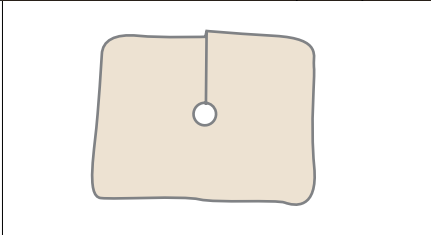
Clean the stoma, meaning the area of the skin around the outer canula, at least twice a day and more often if needed. If you are using a tracheostomy dressing under your stoma, it should also be changed whenever it is wet or dirty, or at least once a day when you clean your stoma.

### To clean around your stoma you will need:

	Cotton tipped swabs (e.g., Q-Tips®)		Tweezers
	Mirror and good lighting		2 clean facecloths ( <i>used only for trach care</i> )
	Tracheostomy dressing ( <i>if necessary</i> )		Tap water

### Steps to clean your stoma

<b>1</b>	Wash your hands.	
<b>2</b>	Gently remove old dressing, if any, and throw it away.	
<b>3</b>	Wash your hands again.	
<b>4</b>	Place the materials on a clean area.	
<b>5</b>	Choose a comfortable sitting position in front of a mirror.	
<b>6</b>	Wet facecloth with tap water and gently cleanse the tracheostomy plate and skin around it. Cotton tipped swabs or tweezers may be used for “hard-to-get” areas under the tracheostomy plate.	
<b>7</b>	Use a dry, clean facecloth to pat the area dry.	
<b>8</b>	If you have dried secretions in your stoma, remove it with a cotton tipped swab soaked in normal saline or distilled water.	
	 <b>Take extra care not to get any water into your stoma.</b>	

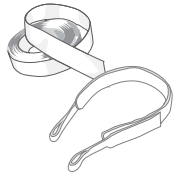
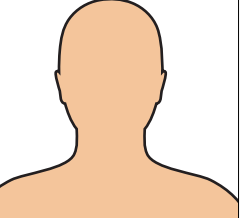

9	Look closely at your stoma site. Check for signs of infection (e.g., redness, swollen, painful, hot to touch, foul smelling, pus around stoma site).	
<b>If you notice any of these signs, please advise your healthcare professional.</b>		
10	Place a clean dressing around your stoma with the open ends up, if needed.	
11	Wash your hands.	

 **It may be normal to see a small amount of blood from time to time around your stoma. This is caused by some irritation from your tracheostomy tube.**

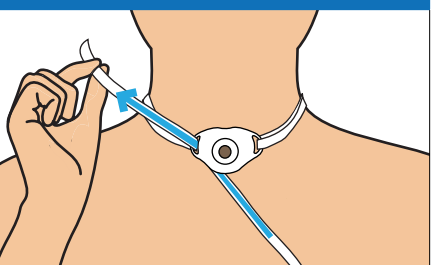
## Changing the tracheostomy ties

Your tracheostomy ties will need to be removed and replaced when they are wet or dirty. **You should always put on and attach the new ties before removing the old ties.** If you remove the old ties first, your tracheostomy tube could fall out if it is not being held in place. If you are not able to do this, you will need someone to help you.

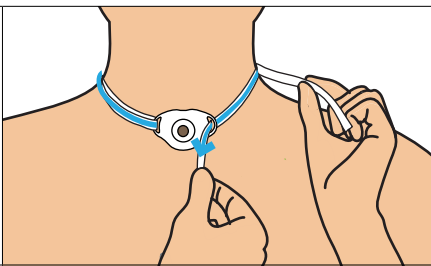
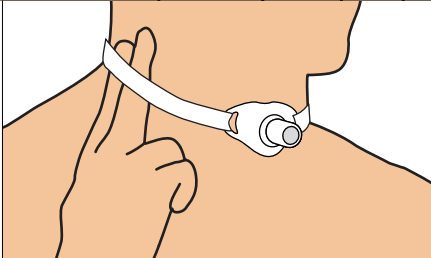
### To change your tracheostomy ties you will need:

Tracheostomy ties		Someone to assist you	
Scissors			

### Steps to change your trach ties

<p>1 Leave the old tracheostomy ties in place. Insert one end of the new tracheostomy tie through the opening on one side of the tracheostomy plate. Then fasten the Velcro strap.</p>	
--	--

If you are unable to do this, have your helper hold the tracheostomy plate with their thumb and index fingers. Once they are holding your tracheostomy tube in place, you may remove the old ties.

2	Wrap the ties around. Insert the other end of the new tracheostomy ties through the opening on the other side of the tracheostomy plate. Fasten the Velcro strap.	
3	Ensure that you can fit <b>two fingers</b> between the ties and your neck. If it is too loose, you can tighten your ties by using the Velcro strap located at the back of your ties.	
4	Remove the old tracheostomy ties if you have not done so already.	



**If your tracheostomy ties are too loose this may create movement that may cause damage to your trachea.**

## — Living with a Tracheostomy

Having a tracheostomy should not affect most of your normal activities. You should be able to continue indoor and most outdoor activities. Here are a few tips to help you.

### Humidification

It is important to keep your secretions thin!

Since the air goes straight into your tracheostomy tube, your nose can no longer clean, warm and put moisture in the air you breathe. Because of this, the air you breathe through your tracheostomy tube is very dry, cool and can irritate your airways.

These conditions can make your secretions thick and hard to cough out and may make breathing more difficult for you. Dry air can cause secretions to form and clog your airway. Therefore, it is important to keep your secretions thin so that you can cough them up easily.

#### Tips to make sure you have enough humidity:

→ Wear a tracheostomy bib.



→ Drink 6 to 8 glasses of liquids per day.

→ Close the bathroom door and turn on the hot water in the shower to fill the room with steam. Sit in the room and breathe deeply for 10 to 15 minutes.

- Use a humidifier at home.
- **Avoid air conditioning**, if possible, as it may dry your secretions.
- Sleep in a cool room at night.

## Bathing

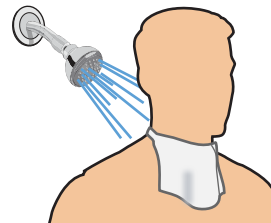
You may take a bath in a tub of shallow water or a shower with a tracheostomy tube. **You will need to be careful to prevent water from entering your tracheostomy tube.**

### Tips to prevent water from entering your tracheostomy tube:

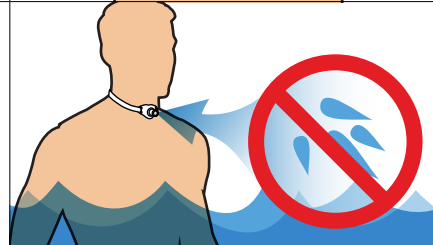
- It is best to cover the tracheostomy tube with a shower shield that helps keep the water out of the tube while showering. Use a movable showerhead to control water flow.

*Please see "Support & Community Resources" section on page 35.*

- If taking a shower, aim the showerhead at your lower body or back.



- Avoid splashing water into the tracheostomy.



## Swimming

You will not be able to swim with a tracheostomy tube. You can still enjoy going around the pool. Be very careful if you are near water (pool, lake, ocean, etc.). If you accidentally fall into water, the water will enter your lungs and you can drown.



**Water should not go into your tracheostomy tube in any situation. Swimming is life threatening. We do not recommend swimming.**

## Eating

Most people with a tracheostomy are able to swallow food and liquid normally. However, swallowing food and liquid may be hard for some people. Swallowing will be assessed by a specialized therapist before you are discharged home.

### Tips to prevent problems with swallowing

- Sit upright, lean forward slightly as you eat.
- Eat slowly. It is the best way to avoid choking.
- Chew your food well.

- Focus on your swallowing.
- Avoid food with seeds.
- Sip liquids slowly. Liquids are often harder to swallow.
- After your evaluation, the therapist will have other suggestions or tips more specific to you.

### Mouth care

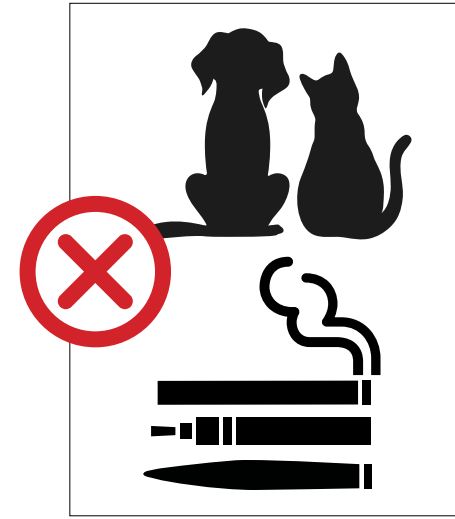
It is important to remember to continue to take care of your mouth and nose as these areas are no longer moistened, and it is harder for you to detect mouth odor. Continue to brush your teeth and clean your mouth, as you would normally do before you had the tracheostomy tube.

### Clothing

You can wear any kind of clothes that are loose around the neck. Avoid fuzzy or loose fibers around your tracheostomy tube as you could accidentally breathe them into your airway.

There are scarves and special neck ties that are specially designed to wear with a tracheostomy tube.

*Please see the "Support & Community Resources" section for details on page 35.*



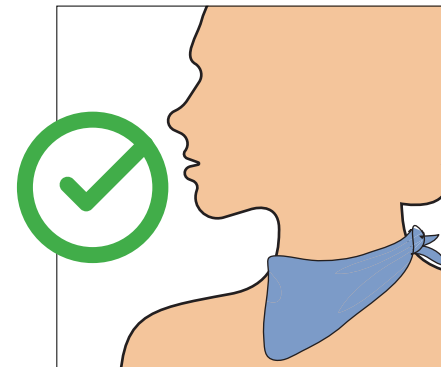
### Precautions to take

Be careful that nothing enters your tracheostomy tube. This includes cotton swabs, tissues, shaving cream, hairs, perfumes, powders, and aerosols. Try to avoid areas where there is a lot of dust, fumes, and smoke, because this will irritate your airway.

If you have an animal that sheds, please make sure that the animal is properly groomed and vacuum/dust your home frequently.



**Whenever you clean, wear a scarf or cover your tracheostomy to protect your airway.**



When you are outside, make sure insects, leaves, and other things do not enter the tracheostomy tube. In the winter, when the air is cold, wear a scarf or cover your tracheostomy. This will help to warm the air slightly.



## Illness: cold and flu



Please see your doctor if you are experiencing any of the following symptoms:

- o much more secretions than normal
- o green and foul-smelling secretions
- o difficulties breathing
- o fever above 38.5°C

If you catch a cold or flu, you may notice an increase in secretions. This is normal.

### Tips to avoid getting the cold or flu

- Make sure your vaccinations are up to date. Check with your doctor.
- Avoid crowded spaces and people with the flu or who are sick.
- Avoid caregivers who have the flu or a cold, if not possible, they should wear a mask.

## Washing your hands

Washing your hands properly is important at all times, not only when you are cleaning your tracheostomy tube. Routine hand washing will help prevent infections or illnesses. See page 11.

## Quitting smoking

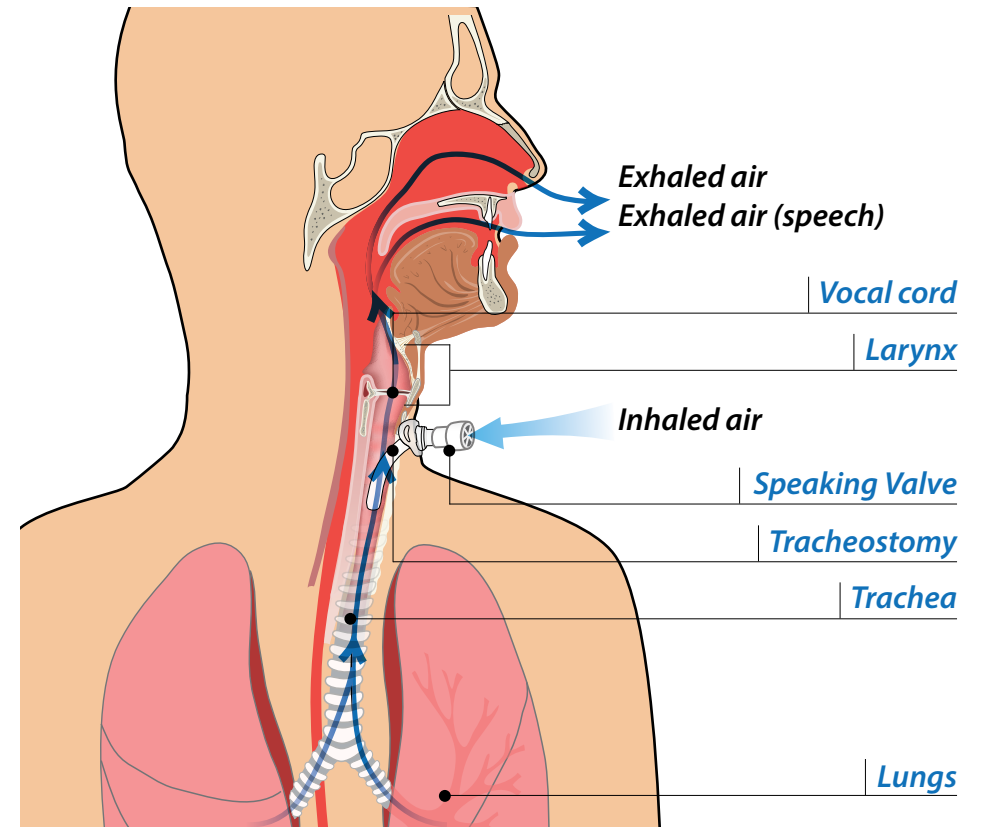
If you are interested in quitting smoking, please speak to your doctor about our smoking cessation program. You will need a referral.

## Medication

Please note that if you take inhalers (puffers) you will need an adapter for your tracheostomy tube. Please contact your pharmacy to get one.

## Communication

The loss of speech can be scary and frustrating. Being able to speak is very important to all of us. Before you are discharged home, your communication needs will be assessed by a Speech-Language Pathologist (S-LP).



The sound of your voice is produced when the air that you breathe out from your lungs passes through your vocal cords. It is very difficult to speak when your tracheostomy tube is open because it is located below your vocal cords. With a tracheostomy tube, the exhaled air comes out of your tracheostomy tube. It does not go through your vocal cords.

There are many ways for people who have tracheostomies to communicate.

- A speaking valve that can be attached to the end of your tracheostomy tube
- Typed speech (electronic tablet, smartphone or computer)
- Pencil/Pen and paper
- Picture or alphabet boards to help with communication
- Electrolarynx (device to help make sounds for communication)

#### If you do have a speaking valve here are some tips for you

- The valve should be cleaned daily.
  - a. In a bowl, rinse valve in mild fragrance-free liquid soap (e.g., Ivory® or Dove® and warm water).
  - b. In another bowl, rinse the valve well in warm water.
  - c. Allow valve to air dry in container with lid open before storing in closed container.
  - d. **Do not use hot water, hydrogen peroxide 3%, bleach, vinegar, alcohol, brushes or cotton tipped swabs.**

→ If using a puffer, remove valve first.

→ Remove valve if breathing, coughing or talking is difficult.

→ If your valve begins to make a honking noise, request a replacement from the SAL-PAC Program:  
[www.chumontreal.qc.ca/repertoire/service-aux-laryngectomises-programme-daide-communication-sal-pa](http://www.chumontreal.qc.ca/repertoire/service-aux-laryngectomises-programme-daide-communication-sal-pa) (in French only)

→ Follow any other instructions given to you by your Speech Therapist.

## ● Problem-solving — What to do if:

### **“I have a hard time breathing.”**

You may have secretions in your trach tube.

Steps to follow:

1. Tell someone in your home.
2. Give a strong, hard cough to see if you can cough up your secretions or you may suction yourself if you cannot cough up your secretions.
3. If this does not work you can take the inner cannula out, clean it, and reinsert it.
  - \* If this works and you can breathe easily, here are some things to consider:
    - if your secretions are thick, sticky and/or hard to cough up, consider steps to make them thinner (see “Tips to make sure you have adequate humidity” on page 25).

### **“I simply can’t breathe through my tube.”**

The chances are very small that this happens. If it does happen, it is because the tracheostomy tube has slipped out of position or secretions are blocking your tracheostomy tube.

Steps to follow:

1. Stay calm and tell someone in your home.
2. Take out the inner cannula. If you can breathe and you can see the blockage, clean your inner cannula immediately and reinsert it. Consider the steps to make your secretions thinner (see “Tips to make sure you have adequate humidity” on page 25).
3. If you still cannot breathe after cleaning and/or reinserting the inner cannula, call 911.

## “My trach tube comes out.”

This may happen when you are changing your tracheostomy ties or if your ties are too loose.

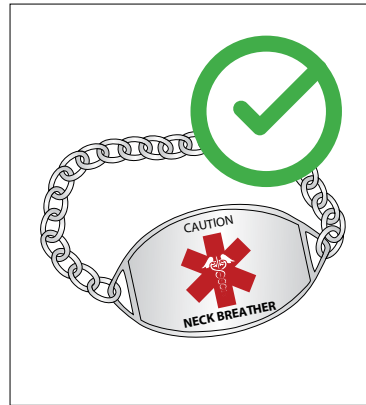
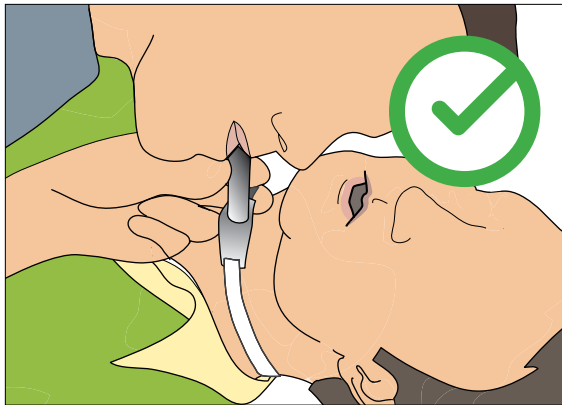
Steps to follow:

1. **Stay Calm.** Your stoma will not close immediately.
2. Notify someone in your house.
3. Tilt your head back slightly to keep the stoma opening larger.
4. Breathe normally through your stoma.
5. If you were taught, you can reinsert your tracheostomy tube with the obturator.
6. If not, call 911 or have someone drive you to the nearest hospital emergency room. Bring your extra tracheostomy tube box for reinsertion.

## ● CPR (cardiopulmonary resuscitation) on a Tracheostomy Patient

It is important that your family/friends understand how to do CPR on someone with a tracheostomy tube in place. Remember, you are now breathing through your tracheostomy tube and not your mouth.

Therefore, CPR should be done as a mouth-to-stoma instead of mouth-to-mouth. We recommend that you use a medical bracelet indicating that you are a “neck breather”.



## ● Support and Community Resources

This is a list of possible resources. There may be others. This list is for information only. The MUHC has no connection or partnership with the companies and associations listed here.

**Association québécoise des laryngectomisés:** [www.aqlar.org](http://www.aqlar.org)

**What can they provide?** Shower shield, Stoma covers (scarves/neck ties)

**Centre Hospitalier de L'Université de Montréal (CHUM) — Service aux laryngectomisés, Programme d'aide à la communication (SAL-PAC):**

[www.chumontreal.qc.ca/repertoire/service-aux-laryngectomises-programme-daide-communication-sal-pac](http://www.chumontreal.qc.ca/repertoire/service-aux-laryngectomises-programme-daide-communication-sal-pac) (in French only)

**What can they provide?** Speaking valve/communication devices, tracheostomy ties, cotton tip applicators (Q-tips), tracheostomy brush, normal saline, tracheostomy dressings, tracheostomy bib

**Service Régional de Soins à Domicile (SRSAD) du CIUSSS de l'Est de l'Île de Montréal** (Only for patients living on the island of Montréal. If not, equipment will be provided by the CLSC)

**What can they provide?** Suction machine, suction catheters, high humidity machine, oxygen (if required).

### Enteral Feeding

- If no private insurance: formula covered by RAMQ
- If cancer diagnosis: feeding pump covered by designated company

**CLSC** - referral for tracheostomy care and nutrition

**Canadian Cancer Society:** [www.cancer.ca/en](http://www.cancer.ca/en)

**Cedars CanSupport:** [www.cansupport.ca](http://www.cansupport.ca)

## Additional Medical Supplies

This is a list of possible companies for supplies. There may be others. This list is for information only. The MUHC has no connection or partnership with the companies listed here.

To order other medical supplies for your tracheostomy care, you can consult:

1. **Dufort & Lavigne Medical Supplies**  
www.dufortlavigne.com
2. **Medical Mart**  
www.medimart.com

## Appendix 1

### How to make your own distilled water

#### What you will need

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | 4 cups of tap water                              |
| <input type="checkbox"/> | 1 clean pot and lid                              |
| <input type="checkbox"/> | 1 mason jar large enough to hold 4 cups of water |
| <input type="checkbox"/> | Stove  |
| <input type="checkbox"/> | Label and pen                                    |

#### Steps

- |   |   |
|---|---|
| 1 | Fill clean pot with 4 cups of tap water.  |
| 2 | Place the pot on the stove and set on high. Once the water begins to boil, cover pot with lid. Let water boil for 10 minutes. |
| 3 | Once the water is cooled, you can place it into a clean mason jar.  |
| 4 | Ensure the lid is on tightly. Label jar with date and time.   |
| 5 | Store jar in a clean, dark, dry area for up to 6 months.  |

## — Acknowledgements and Authors

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### **Developed by:**

- Jasmine Lee Hill, RN, MSc (N) – Advanced Practice Nurse
- Carissa Wong, RN, MSc (A) – Advanced Practice Nurse

### **Revised Version Consultants:**

- Raphaëlle Bastarache, RN, M. Sc – Advanced Practice Nurse
- Gabriel Domocos RN, MSN – Advanced Practice Nurse
- Nicole Drummond, RN, M. Sc (A) – Advanced Practice Nurse, Surgical Services
- Ashraf Emara, RN, MSN – Advanced Practice Nurse
- Yasmine Kheloufi, S-LP(C), M. Sc. – Speech-Language Pathologist
- Alena Seresova, S-LP(C), M.Sc.(A) – Speech-Language Pathologist
- Brendan Timmins, RN, MSC (A) – Advanced Practice Nurse
- Tin Tjoe, RN, M. Sc (N) – Advanced Practice Nurse (Interim)

### **Original Version Consultants:**

- Sandra McCarthy, RN, BSN – Home Care Liaison Nurse
- Jeanne Côté, RN – ENT Nurse
- Genevieve Beauregard-Paultre, S-LP (C), M.Sc. (A) – Speech-Language Pathologist
- Judith Robillard-Shultz, S-LP (C), M.Sc. (A) – Speech-Language Pathologist
- Ruth Guselle, RN, BSN – Family Nurse Clinician
- Andrea Darbough – Fellow

### **Graphic Design:**

- MUHC Medical Multimedia Services



**Important:**

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a healthcare professional, or to substitute medical care. Contact a qualified healthcare professional if you have any questions concerning your care.

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Health Centre

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