

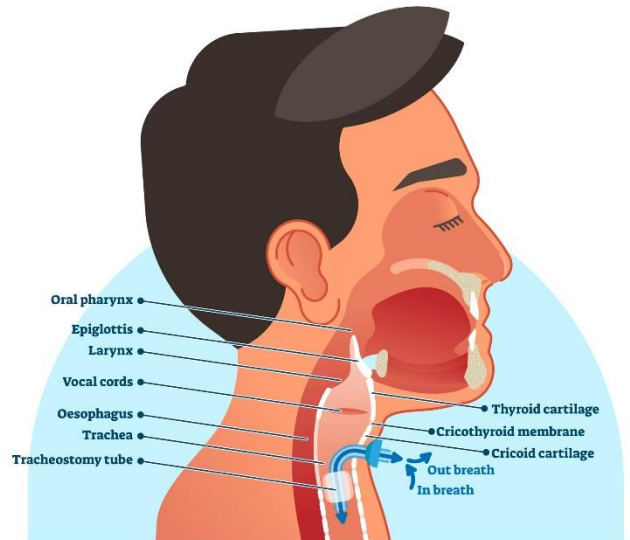
Tracheostomy Basics for Caregivers

What is the difference between a Tracheostomy and “Trach”?

A tracheostomy, also called “trach” for short, is a surgical opening (stoma) that is made into the trachea (windpipe) in the neck. A tube is then put into the stoma. This will help your child breathe.

Why might your child need a Trach?

- Your child may need a trach if they struggle to breathe through their nose and mouth. A tracheostomy helps the air move in and out of their lungs in a different way.
- Your child will need a trach if they are not able to breathe on their own and need help from a special machine called a mechanical ventilator.
- A trach is needed to keep your child's airway open if their windpipe is too small or blocked.



What are common myths about tracheostomies?

1. Myth: Having a trach means your child cannot lead a normal life.

Truth: With careful care and support, most kids with a trach can do many activities and have fun, just like other kids.

2. Myth: Children with a trach cannot communicate.

Truth: Even though talking might be hard at first, children with a trach can still communicate well. This includes using sign language, communication boards, or special valves like the Passey-Muir valve. With help from a speech therapist, they can learn these methods and become better at expressing themselves over time.

3. Myth: Children with a trach need medical care every moment of the day.

Truth: With the right training and education, families can take care of their child at home. Being at home:

- lets them do regular activities
- helps them feel normal
- continues family bonding and makes families stronger

4. Myth: All children with a trach have problems with their skin.

Truth: Tracheostomies may cause skin problems, such as rashes or granulation tissue. However, these issues are not usually serious. With proper care, we can lower the chance of these issues happening.

Can my child eat and drink with a trach?

- Some kids with a trach can still eat and drink through their mouth.
- Talk to your medical team about when it is safe for your child to eat by mouth. They might suggest that your child get support from a feeding specialist.
- If you ever see food or liquid coming out from the trach, stop feeding them right away and tell your child's doctor.
- Children with a trach need to get enough water or other liquids (either by mouth or by a feeding tube). This helps keep their mucus thin and moist, making it easier for them to cough up or suction their mucus out. Talk to your child's team to make sure they get the correct amount of water and fluids.

Safety Measures for a Child with a Tracheostomy

- Always carry emergency supplies with you and your child, even during clinic visits! These supplies are important to have for any situation, even when the child is being transported by emergency medical services.
- When your child breathes in cold air, it can make the muscles around their airway tight. This makes it harder to breathe. Use a mist collar to humidify (moisten) the air, making it easier to breathe. Your child may also try the Heat Moisture Exchanger (HME), also called an “artificial nose”. This provides warmth or moisture to prevent any major issues as your child gets used to cooler air.
- Maintain good oral hygiene. Brush and floss your child's teeth every day. Poor oral hygiene may lead to an infection in the lungs/airway. This happens when you breathe in bacteria that grows in the mouth and it goes to the lungs.
- Keep dust, sand, smoke, pet hair, powders, and aerosol sprays away from your child to avoid irritating the lungs. Try to limit the amount of time that your child is around people who smoke. Vacuum your home often.
- Ensure small toys or objects are out of reach to prevent your child from putting them in their mouth or blocking the trach.
- Watch your child when they play, especially with other children, to prevent them from touching or pulling the trach.
- Contact sports and water activities are not allowed with a trach.



- When bathing, avoid getting water in the trach. For young children, bathe in shallow water and keep a close eye on them. Older children can shower with water pointed away from the trach to lower the risk of water getting in the trach.
- The HME can be placed over the trach during the bath/shower if the child does not have a lot of secretions. This can also help prevent water from going into the trach.
- Only people trained by an approved caregiver can perform trach care.

Can a Tracheostomy be Closed?

- A tracheostomy is not permanent if the reason your child needed the trach has been fixed. You can talk to your child's Ear, Nose, Throat (ENT) specialist about the steps to remove the trach.

What are the steps for my child's tracheostomy to be closed?

1. Your child's medical team might recommend using a speaking valve first. This valve lets your child breathe in through the trach but breathe out from their mouth and nose.
2. If your child does well with the speaking valve, the doctor may recommend "capping" the trach for short period of times during the day. A cap is placed on the trach tube to see if they can breathe only through their nose and mouth.
3. Once the trach tube is removed, your child will breathe normally through their mouth and nose again. The hole (stoma) from the tracheostomy usually heals on its own. In some cases, surgery might be needed to close it.

Before You Take Your Child Home with a Trach

- You will learn a lot of information and new skills to safely take care of your child with a tracheostomy. Tracheostomy care and tracheostomy CPR classes are held in the Family Resource Center every Monday.
- At least two caregivers are required to learn to care for a child with a trach.
- After you complete all the required education, you will be asked to stay in the hospital with your child for 24 hours. During that time, you will be caring for everything related to the tracheostomy.

You will be taught:

- 1) To keep the skin around the trach opening clean and dry to prevent skin issues.
- 2) To change the trach tube and trach ties.
- 3) To suction the trach tube correctly to prevent blockages (mucous plugs).
- 4) To recognize signs and symptoms of infection
- 5) To know what to do in case of an emergency.
- 6) To wash/clean the trach tube.
- 7) The necessary supplies needed for home trach care.



When should I call 911?

- Unable to suction mucous plugs
- Extreme irritability and struggling for air
- Cannot see the chest rise when giving rescue breaths
- Cannot get the trach tube back in after following the steps taught during training and trying the emergency backup trach tube!

Remember, support is always available at Children's Hospital Los Angeles to help you and your child with their tracheostomy needs.

Who do I call if I have questions about my child's trach?

ENT Clinic	(323) 361-2145
Office Hours	Monday to Friday, 8:00 a.m. to 4:30 p.m.
After Office Hours, Holidays or Weekends	Urgent Calls: Call (323) 361-2450, Dial "0" for the Operator. Ask to speak to the ENT doctor on call. Non-Urgent Calls: Call and leave a voicemail for Nicole Anderson, NP with your child's name and Date of Birth (DOB).
ENT/Tracheostomy Nurse Practitioner (NP)	Nicole Anderson, NP (323) 361-7682
ENT Nurse	Elizabeth Minasian, RN (323) 361-9694