

	Department:  <b>Respiratory Services</b>	Date Originated: <b>September 1986</b>  Date Reviewed/Revised: <b>Sept 2012</b>
<b>CLINICAL PRACTICE GUIDELINE</b>	Topic: <u>Critical Care – Tracheostomy Care (Respiratory Therapy)</u> Number: B-00-12-12070	Related Links:  <a href="#">Tracheostomy Care</a>

**PRINTED** copies of Clinical Practice Standards and Procedures may not be the most recent version.  
 The **OFFICIAL** version is available on the PHC Intranet – Policies & Manuals web page.

### APPLICABLE SITES:

St. Paul's Hospital  
 Mount Saint Joseph Hospital

### GENERAL INFORMATION:

Refer to [Tracheostomy Care](#) for complete information.  
 Direct link to Tracheostomy Care Procedure: [Mosby's Nursing Skills](#)

### TRANSPORT OF PATIENTS WITH ARTIFICIAL AIRWAYS:

For patients with artificial airways in critical care areas or the general wards, the Respiratory Therapist will be available for the assessment and transport of the patient using the following guidelines:

1. Advance notice must be provided to the Therapist of the impending transport (particularly important on wards).
2. The Therapist will ensure the necessary emergency equipment is prepared and ensure it accompanies the patient at all times during transport.
3. The Therapist will ensure the appropriate oxygen delivery device is set up for use during the transport.
4. A Respiratory Therapist will accompany and remain with the patient in addition to the RN if any of the following is true:
  - a. The cuff is inflated
  - b. Patient requires suctioning every 2 hours or more frequently
  - c. Known history of airway difficulties (ie interstitial events)

- d. The transport is expected to be of short duration
- e. High oxygen requirements ( $\text{FiO}_2$  greater than 0.5)
- f. Passy-Muir valve in situ
- g. The tracheostomy has been in situ for less than 1 week

**NOTE:** On the wards if none of the above is true and the patient is considered stable, the Therapist is not required to accompany the patient on transport.

With all transports the Respiratory Therapist will ensure that the staff in the receiving area is familiar with tracheostomy tubes and basic emergency management. The Therapist will also leave their pager number with the staff.