TRACHEOSTOMY MANAGEMENT IN THE PERIOPERATIVE SETTING

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BACKGROUND INFORMATION:

Patients arrived to our preoperative holding area with a variety of tracheostomies. A portion of these patients were status post laryngectomy increasing their risk for airway issues. There was no structured communication about the tracheostomy or patency of the upper airway. Patients could go to any floor postoperatively with these higher risk airways. It was determined that the airway needed to be clarified in the perioperative setting so the patient would receive the appropriate level of care postoperatively.

OBJECTIVES OF PROJECT:

The institution wanted to increase communication regarding patients with tracheostomies and known laryngectomies. There was a need to identify the patency of the upper airway of patients with tracheostomies in order to appropriately manage an airway emergency. The hospital staff and perioperative staff required education for management of these higher risk airways.

PROCESS OF IMPLEMENTATION:

The perioperative services participated in a house wide program to identify the patency of upper airway in patients with tracheostomies on admission to the hospital. The patients with tracheostomies in the preoperative area were screened on admission and the patency of the upper airway was clarified. If the patient had no patency of the upper respiratory tract, a red sign was placed in the chart and the foot of the bed. This sign defines the appropriate ways to manage the airway in an emergency. The patient with a tracheostomy is transported only to divisions where the staff has received specialized training. Airway travel boxes were assembled for safe transport. Emergency airway numbers were posted in each perioperative area.

STATEMENT OF SUCCESSFUL PRACTICE:

Tracheostomy patients are now receiving additional assessment and management to ensure safe airway management in the perianesthesia area and on the post-operative division.

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

The process of establishing a new airway policy for tracheostomy patients led to an increase in knowledge regarding airway anatomy and management for the entire perianesthesia nursing staff.