Emergency tracheostomy management - Patent upper airway

**Call for airway expert help**

*Look, listen & feel at the mouth and tracheostomy*

A Mapleson C system (e.g. ‘Waters circuit’) may help assessment if available

Use *waveform capnography* when available: exhaled carbon dioxide indicates a patent or partially patent airway

---

**Is the patient breathing?**

- No: Call Resuscitation Team
  - CPR if no pulse / signs of life

- Yes: Apply high flow oxygen to BOTH the face and the tracheostomy

**Assess tracheostomy patency**

- Remove *speaking valve* or cap (if present)
  - Remove *inner tube*
  - Some inner tubes need re-inserting to connect to breathing circuits

  **Can you pass a suction catheter?**

  - Yes: The tracheostomy tube is patent
    - Perform tracheal suction
    - Consider partial obstruction
    - Ventilate (via tracheostomy) if not breathing
    - Continue ABCDE assessment

  - No: Deflate the *cuff* (if present)
    - *Look, listen & feel at the mouth and tracheostomy*
    - Use waveform capnography or Mapleson C if available

    **Is the patient stable or improving?**

    - Yes: Tracheostomy tube partially obstructed or displaced
      - Continue ABCDE assessment

    - No: REMOVE THE TRACHEOSTOMY TUBE
      - *Look, listen & feel at the mouth and tracheostomy*. Ensure oxygen re-applied to face and stoma
      - Use waveform capnography or Mapleson C if available

      **Call Resuscitation team**
      - CPR if no pulse / signs of life

      **Primary emergency oxygenation**

      - Standard *ORAL airway* manoeuvres
        - Cover the stoma (swabs / hand). Use:
          - Bag-valve-mask
          - Oral or nasal airway adjuncts
          - Supraglottic airway device e.g. LMA

      **Tracheostomy STOMA ventilation**
      - Paediatric face mask applied to stoma
      - LMA applied to stoma

      **Secondary emergency oxygenation**

      - Attempt *ORAL intubation*
        - *Prepare for difficult intubation*
        - Uncut tube, advanced beyond stoma

      - Attempt *intubation of STOMA*
        - Small tracheostomy tube / 6.0 cuffed ETT
        - Consider Aintree catheter and fibreoptic ‘scope / Bougie / Airway exchange catheter

---