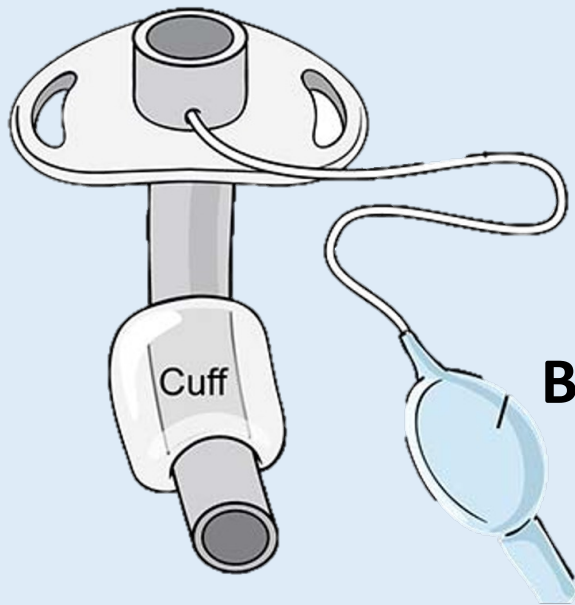


TRACH OVERVIEW

**OUTER
CANNULA**



**INNER
CANNULA**



OBTURATOR



PLUG



**PILOT
BALLOON**

TRACH EMERGENCIES

1. DISLODGED

2. OBSTRUCTION

3. HEMORRHAGE

DISLODGED TRACH

1. Tracheostomy or total laryngectomy?*
2. When was it placed?
3. When exactly did it dislodge?

CAN'T INTUBATE ORALLY

PT CAN'T TELL YOU → ETCO2 TO NASOPHARYNX TO DETERMINE COMMUNICATION WITH THE TRACHEA

< 7d = TIME SENSITIVE

OXYGENATE VIA NRB

RECANNULATE

CONFIRM WITH DIRECT VISUALIZATION

FAILURE

ORAL INTUBATION

TRACH OBSTRUCTION



1



2

1. OXYGENATE OROPHARYNX WITH NRB
2. REMOVE EXTERNAL DEVICES
3. REMOVE INNER CANNULA
4. SUCTION WITH TRACHEOSTOMY CATHETER



3



4

FAILURE TO OXYGENATE



5, 6

5. DEFLATE CUFF (IF PRESENT)
6. REMOVE TRACHEOSTOMY
7. BVM AND/OR INTUBATE



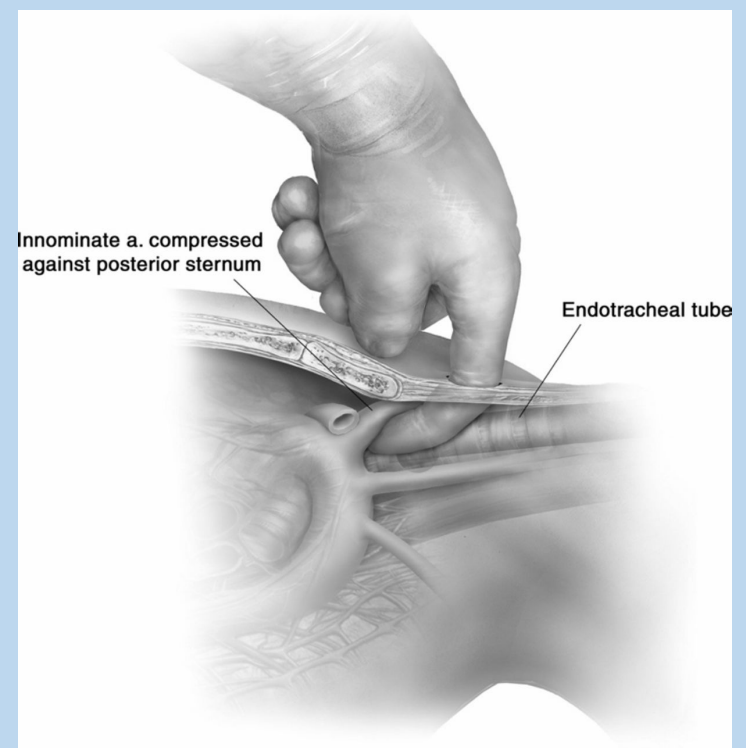
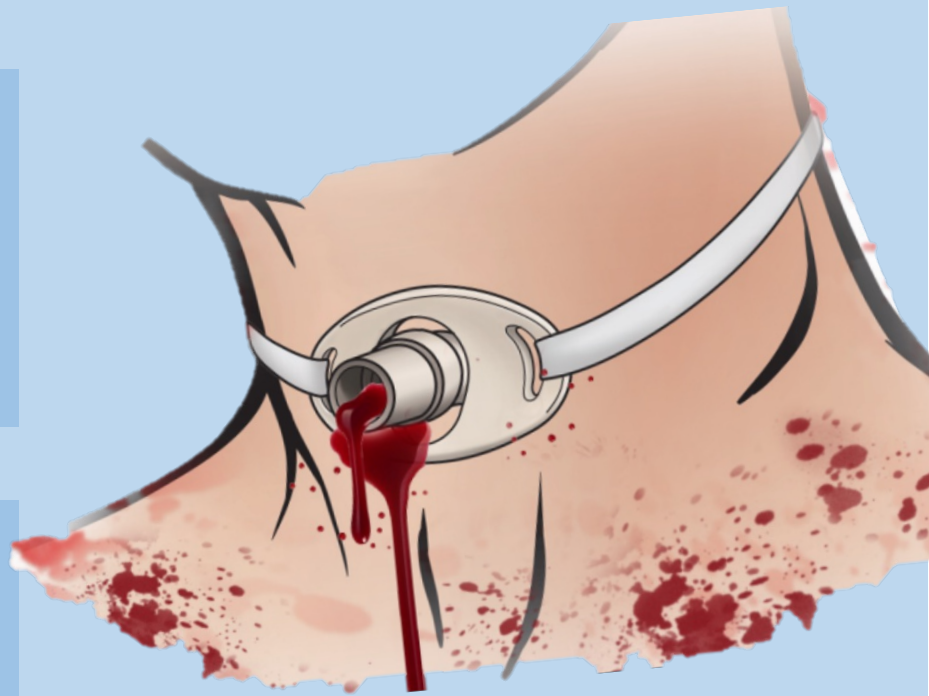
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TRACH HEMORRHAGE

1. Apply pressure at the sternal notch
2. Mobilize vascular surgery, IR and ENT
3. Inflate cuff maximally
4. Bleeding stops → OR for repair

5. Bleeding continues → intubate stoma with ETT
6. Overinflate cuff
7. Bleeding stops → OR

5. Bleeding continues → oral intubation
6. Remove tracheostomy
7. Manual compression



PEARLS

Beware of the Sentinel Bleed

Hemoptysis that has resolved --> IR, vascular, ENT

Localized bleeding → Surgicell