



1

BEFORE PROCEDURE

THINGS TO DO		✓
Communicate with family/EPOA, primary team & inform ACNM		
Review coagulation (INR/APTT/Platelets/R _x dose Enoxaparin)		
Ensure capnography is attached and functioning		
Stop feed & aspirate NG tube		
Pre-oxygenate (set ventilator FiO ₂ to 100%) & ensure adequate minute volume; consider increasing ASV pressure limit		
Tape patient's eyes shut		
DRUGS DRAWN UP		✓
Sedation: usually Propofol infusion		
Analgesia: usually Fentanyl 500mcg (neat in 10 ml syringe)		
Relaxant: usually Atracurium 50mg (neat in 5 ml syringe)		
Metaraminol (premix 10 mg in 10 ml syringe) left in package		
Local anaesthetic with adrenaline left in sterile package		



2

GATHER EQUIPMENT
Turn over for list & location



3

AFTER PROCEDURE

THINGS TO DO (MEDICAL STAFF)		✓
Change ventilator mode to 'Trach Tube' setting & turn off ATRC* (press ETT picture at top left of Mindray screen → Select 'Disable ATRC')		
Reduce FiO ₂ as appropriate		
Give the small clear plastic Above Cuff Vocalisation valve (from inside the tracheostomy pack) to the bedside nurse. Do not throw this away		
Chart all administered drugs on patient's National Medication Chart		
Document procedure in patient's clinical notes including any complications		
Enter procedure into ICU Database (Reports/Forms → Tracheostomy Reports → Add new Trache)		
Order chest X-ray & review it to exclude collapse/pneumothorax/complication		
Clean & return all equipment to their original locations		
Place a copy of the Tracheostomy Emergency Flowsheet in the bedspace		

EQUIPMENT LIST

LOCATION	ITEM	✓
North/Central/ South base	Emergency airway trolley - video laryngoscope/i-gel/ETT/gel sachet	
Store room	Suction tubing (with blue tip cut off)	
	Percutaneous tracheostomy set (Cook Blue Rhino or other)	
Respiratory area	Lyof foam tracheostomy dressing & tracheostomy securing tapes	
	In-line suction (30.5cm length for tracheostomy tubes)	
Doctor's area	CLAB pack (from CVL insertion area) & sterile gloves	
	Disposable bronchoscope with small monitor on stand	
	White elbow ETT connector with bronchoscopy port	
	Tracheostomy tube (usually 8.0 or 9.0 mm size) left in sterile package (Portex SuctionAid preferred)	
	22G (black) needle left in sterile package	
	Swabstick (2% chlorhexidine gluconate & 70% isopropyl alcohol)	
Bedspace	Protective face shield or goggles	
Stock trolley	Yankauer sucker	
Bedside trolley	10 ml syringe	
	Blunt 18g draw-up needle	
	10 ml 0.9% sodium chloride x2 (for Rhino lubrication)	

*Automatic Tube Resistance Compensation (ATRC) should be turned **off** for patients with tracheostomies. Inconsistency with tracheostomy inner internal diameters between different manufacturers may lead to incorrect settings, increasing work of breathing. ATRC should **always be used** with endotracheal tubes.