



# Amherst Fire District Procedure

## Airway Suctioning - Advanced

### Clinical Indications:

- Obstruction of the airway (secondary to secretions, blood, or any other substance) in a patient currently being assisted by an airway adjunct such as a naso-tracheal tube, endotracheal tube, Combitube, tracheostomy tube, or a cricothyrotomy tube.

### Procedure:

1. Ensure suction device is in proper working order.
2. This is a clean/sterile technique. Care must be used when suctioning a ET-Tube. ***Remember that ET-Tubes are a direct route for infection to the lungs.***
3. Pre-oxygenate the patient as is possible.
4. Attach suction catheter to suction device, keeping sterile plastic covering over catheter.
5. Using the suprasternal notch and the end of the airway into the catheter will be placed as guides, measure the depth desired for the catheter (judgment must be used regarding the depth of suctioning with cricothyrotomy and tracheostomy tubes).
6. If applicable, remove ventilation devices from the airway.
7. With the thumb port of the catheter uncovered, insert the catheter through the airway device.
8. Once the desired depth (measured in #4 above) has been reached, occlude the thumb port and remove the suction catheter slowly.
9. Reattach ventilation device (e.g., bag-valve mask) and ventilate the patient
10. Document time and result in the patient care report (PCR).
11. Place catheter in a clean environment or original packaging when not in use to minimize cross contamination.

### Certification Requirements:

- Successfully complete an annual skill evaluation inclusive of the indications, contraindications, technique, and possible complications of the procedure.