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You can request this information in a different format or another language.

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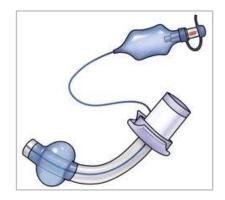
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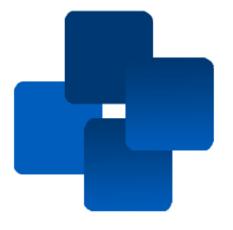


Information for Relatives

Tracheostomy

Critical Care Unit





What is a tracheostomy?

A tracheostomy is a small opening in the front of the trachea (windpipe), through the skin in the neck. A small plastic tube is inserted through the opening and sits in the trachea. This is held in place with a dressing which ties around the neck. The procedure may be performed in the operating theatre or in the Critical Care Unit.



Why might you need a tracheostomy?

A number of patients may need help with their breathing through a tube in their mouth into the windpipe. This is attached to a breathing machine (ventilator), which assists with breathing. However, this means that patients may have to remain sedated in order to tolerate the tube in their mouth. If our patients are requiring a longer period of respiratory support from the ventilator a tracheostomy may be considered. A tracheostomy also makes it easier to keep the lungs clean and enables staff to clear (suction) any secretions from our patients' lungs that they may not be able to do themselves. This procedure may cause some coughing, but the nurses are skilled in doing this and it will be completed very quickly.

Communication

We are able to communicate with our patients using pen/paper, picture boards, gestures and lip reading. This process can be slow and many patients find it frustrating at first, but we will try our best to make it as easy as possible. Although this may be very worrying for you, our doctors, nurses and physiotherapists are very proficient in lip reading and can find out what your relative may be trying to say. It just takes time and patience.

What happens next?

If your relative is to have a tracheostomy, this means that we will be able to wake him/her up, start the recovery process and aim for them to become free of the ventilator and begin breathing independently. Our patients will receive daily chest physiotherapy to improve their lung function and it may involve sitting out in the bedside armchair to increase their strength, enable increasing mobility and reduce the recovery time. Psychologically this is a very good step to getting well again.

Due to the tracheostomy being placed just above the vocal cords in the throat, your relative will be unable to speak or swallow during this time. However, when the patient is breathing independently again and the tracheostomy tube removed, his/her voice will return.

Aftercare

When a tracheostomy is removed, your relative will be able to breathe independently. The small hole left by the tracheostomy tube will heal within 1-2 weeks and normally does not require any stitches. A small dressing is normally placed over the hole while the healing process takes place.

Your relative may require a swallowing assessment before we can allow him/her to eat and drink safely. This is normally done promptly after the tube has been removed.

Further Information

If you have any questions or require any further information, please ask one of the Critical Care team (doctors/nurses/ physiotherapists). We will be happy to explain anything!