Patient Information Series

Use of a Tracheostomy With a Child

A tracheostomy (trake-ee-AWS-toe-mee) is the surgical cut made into the front of the neck and into the windpipe (trachea). The hole that is made is commonly referred to as a "trach" or a stoma. A special tube ("trach" tube) is placed in the hole to help a person breathe.



Why does my child need a trach?

Your child may need a trach for many different reasons. The most common reasons are:

- To help prevent food or saliva from going into your child's lungs (aspiration). Children who have problems swallowing may aspirate food or saliva, which may cause a lung infection and damage the lungs. The trach can help to keep food and saliva out of the lungs.
- To allow use of a breathing machine (mechanical ventilator) to help your child breathe (see ATS Patient Information Series: Mechanical Ventilation). Children who have severe lung problems, or other health problems that affect breathing, may need to use a ventilator to help them breathe. The ventilator can be attached to the trach tube and allow the child to use the mouth and face.
- To help keep your child's airway open. Sometimes a child's windpipe is too small or blocked to allow enough air to flow in and out of the lungs. This can make it very hard for the child to breathe. The trach can help keep the child's airway open.
- To help your child get excess mucus or secretions out of their breathing tubes (bronchial tubes). Some children with lung problems have a lot of mucus that collects in their lungs. If your child cannot cough well enough to "bring up" mucus, the mucus may clog their airways, making it more difficult for your child to breathe. Having a trach allows the child's caregiver to suction out the mucus and keep the airway clear.

Taking care of your child's tracheostomy

Taking care of your child's trach requires certain basic skills. You will be taught how to care for your child's trach before you leave the hospital. You will need to learn:

- How to keep the skin around the trach opening as clean and dry as possible
- How often to change the tracheostomy ties
- How to position the tracheostomy tube and ties correctly

- How to suction the trach tube and prevent it from getting clogged
- How to clean/change the trach tube
- What supplies you will need at home to care for your child's trach.

If you are not sure what you should do or not do with your child's trach, ask a member of your child's healthcare team.

How often does a trach need to be changed?

A trach needs to be changed regularly. Mucus and bacteria can build up over time inside the trach. Your healthcare provider can help you decide how often the trach will need to be changed. This may be once a week or as long as once a month. Most of the time, the tubes can be cleaned and reused multiple times. You should always have a replacement tube nearby as well as a back-up trach tube one size smaller.

Can my child eat and drink with a trach?

Some children may be able to eat and drink by mouth with a trach. However, a trach can cause swallowing difficulties at times, especially when it is first put in. If your child has trouble swallowing with a trach, s/he may need to be fed in a different way, for example, a tube that goes through the nose and into the stomach (NG tube), or a tube that goes right into the stomach or intestine through the skin covering your child's belly.

You should never see food or drink coming from the trach. If this occurs, stop the feeding, and let a member of the healthcare team know at once.

Can my child talk with a trach?

Most of the time, your child will not be able to talk when she first gets a trach. This can be frustrating for families and children, especially if your child was able to talk before getting a trach. A speech therapist or other member of your child's healthcare team can work with you and your child soon after she gets a trach to help you learn ways to communicate. Some children are able to use a speaking valve that is attached to the trach to help them speak more clearly and loudly. If your child's lungs are weak, he may not be able to use a speaking valve.



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What problems can happen with my child's trach?

Serious problems that can happen with your child's trach are:

- The trach tube becomes completely blocked (obstructed) and you are unable to unclog it. (If your child appears to have breathing problems, such as fast breathing, working hard to breathe or turning blue, the trach tube may be blocked.)
- The trach tube accidentally comes out and will not go back in.
- A large amount of bleeding (several teaspoons or more) is coming from the trach area.

If any of these problems do occur, call Emergency Medical Services (usually 911) immediately.

Other problems that are not as serious as those listed above, but need to be reported to your child's healthcare provider are:

- Your child is having a harder time breathing. (The trach tube may be partly blocked.)
- You see a small amount of bleeding in or around your child's trach.
- You think your child has an infection. Signs of an infection can be: changes in the amount, color, odor, or thickness of the mucus in or around your child's trach; your child is having more difficulty breathing than usual; fever.

Can my child's trach ever be removed?

If the reason that the trach was put in is resolved, the healthcare team may plan to remove your child's trach. Before removing the trach tube, your child's doctor may do a bronchoscopy (see ATS Patient Information Series: Bronchoscopy) to check your child's airway. Once the trach tube is out, your child will breathe through her mouth and nose again. The trach opening usually heals on its own. In some cases, surgery may be required to close it.

Tips to stay healthy with a trach

If your child has a trach, there is a higher risk for infection and other complications. Tips to help your child stay healthy with a trach include:

- Avoid infections by: washing hands often and thoroughly, making sure your child receives immunizations, and keeping your child away from others who are sick and away from crowded places like daycare centers and malls.
- Have emergency supplies with your child at all times. Ask your healthcare team for a list of supplies you should have on hand to meet your needs.
- Know how to do cardiopulmonary resuscitation (CPR).
 All parents and caregivers should know how to perform CPR on a child with a trach

- Have telephone service available. A land-line or cellular phone is needed at home and a cellular phone is helpful during travel.
- Avoid dust, smoke, pet hair, powders, greasy creams or ointments, and sprays that could irritate the lungs.
- Keep small toys or objects that your child could put into their trach away from your child.
- Since contact sports and water sports are not usually allowed, ask your healthcare provider what sports your child can play.
- When bathing, try not to get water in the trach. Young children may be bathed in 1-2 inches of water with the caregiver close at hand. Older children may shower.

Additional Resources:

American Thoracic Society

www.thoracic.org/sections/education/patient-education/patient-education-materials/index.html)

www.thoracic.org/sections/education/care-of-the-child-with-a-chronic-tracheostomy/index.html)

Aaron's Tracheostomy Page

www.tracheostomy.com

American Head & Neck Society

www.headandneckcancer.org

UCL Institute of Child Health

www.ich.ucl.ac.uk

Family Voices

www.familyvoices.org

R What to do...

As a parent, you are the most important person in your child's life. A medical social worker or insurance case manager can be helpful as you find the resources your child needs.

- Make sure that you are comfortable and know how to take care of your child's trach. Ask questions and practice taking care of your child's trach while your child is in the hospital.
- ✓ Work with your child's healthcare team for help with feeding and/or talking.
- ✓ Have an emergency kit and back-up trach available at all times.
- ✓ Always have a trained caregiver with your child.
- ✓ Care for your child's trach as instructed and take care to avoid infections.

Doctor's Office Telephone:

The ATS Patient Information Series is a public service of the American Thoracic Society and its journal the AJRCCM (www.atsjournals.org). The information appearing in this series is for educational purposes only and should not be used as a substitute for the medical advice of one's personal health care provider. For further information about this series, contact J.Corn at jcorn@thoracic.org.