

Emergency Tracheostomy Tube Reinsertion Medical Directive

An Advanced Care Paramedic may provide the treatment prescribed in this “local home medical technology” Medical Directive if authorized.

Indications

Patient with an existing tracheostomy where the inner and /or outer cannula(s) have been removed from the airway

AND

Respiratory distress

AND

Inability to adequately ventilate

Conditions

Emergency Tracheostomy Tube Reinsertion	
Age	N/A
LOA	N/A
HR	N/A
RR	N/A
SBP	N/A
Other	Inner and/or outer cannula has been removed No family member / caregiver is available to replace the tracheostomy cannula(s) Airway patency / ventilation requires reinsertion

Contraindications

Tracheostomy Tube Reinsertion

Lack of availability of a suitable replacement tracheostomy cannula (new or cleaned or endotracheal tube)

Inability to landmark or visualize

Treatment

Consider Emergency Tracheostomy Tube Reinsertion

The maximum number of attempts is 2.

Clinical Considerations

A reinsertion attempt is defined as the insertion of the tube into the tracheostomy,

A new replacement inner cannula is preferred over cleaning and reusing an existing one, which is preferred over mask/stoma ventilation.

Replacing the outer cannula with a new or cleaned one is preferred over utilizing an uncuffed and uncut endotracheal tube (2 mm smaller than the patient's intended cannula). If both of these options are unsuccessful, attempt mask/stoma ventilation.

Under ideal circumstances, the tracheostomy tube should not be changed within the first 14 days after surgical placement.