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- B. Cleanse skin frequently, and place a dry gauze around stoma.

VII. The client/caregiver can state procedure to follow if trach tube accidentally falls out.

- A. Remove the inner cannula from the dislodged tube.
- B. Insert the obturator into the outer cannula, and reinsert the tube.
- C. Remove the obturator and insert the inner cannula.

VIII. The client/caregiver can list general precautions.

- A. Do not allow smoking in the same room.
- B. Avoid aerosol sprays and dust that may enter trach.
- C. Provide adequate humidification.
- D. Keep a suction machine at the bedside at all times.
- E. Perform suctioning as needed, but avoid oversuctioning because it may increase secretions.
- F. Tape obturator to head of bed, and keep an extra tracheostomy set and hemostat at the bedside.
- G. Prevent infection with good oral hygiene; avoid persons with respiratory infections. Use good hand-washing procedures.
- H. Avoid getting any water into the stoma.
- I. Use other communication techniques if speaking is impaired (call bell, sign language, pictures, etc.).

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- J. Cover the stoma loosely if going out into very cold weather.
- K. Drink at least 3000 ml of water per day unless contraindicated.
- L. Avoid smoking.
- M. Wear Medic Alert bracelet.
- N. Keep follow-up appointments with physician.

RESOURCES

American Head and Neck Society
www.headandneckcancer.org/patienteducation/docs/tracheostomy.php

Speech therapist

Support groups

Medical supply company

REFERENCES

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