

# Southern Illinois Regional EMS System

## II-20 DEEP TRACHEAL SUCTIONING OF THE NEONATE

### Policy:

- To establish guidelines for the performance by prehospital personnel of deep tracheal suctioning of the intubated patient.

### Equipment:

- Disposable gloves, full face protection and any other PPE deemed necessary
- Oxygen
- Sterile water or sterile saline
- Appropriately sized BVM and mask
- Suction catheters of various sizes:
  - Sizes 6, 8, 10
- Properly operating suction unit
- Laryngoscope handle with infant blades
- Appropriately sized ET tubes
- Several 4X4 gauze

### Procedure:

- Don PPE
- Assemble all necessary equipment
- Monitor patient for necessity for Deep Tracheal Suctioning:
  - Meconium staining of the amniotic fluid is present on the infants face, in the nose or pharynx
  - Meconium may present as a green discoloration or particulate matter
  - To prevent meconium aspiration:
    - Infants require thorough hypo pharyngeal suctioning before initiation of respiration
    - Thus, ideally, management begins during the delivery of the infant
- After the head has been delivered, but before the thorax is delivered:
  - The mouth and nose should be cleared of the meconium fluid
  - Using a bulb syringe, gently suction both nostrils of the nose and pharynx to remove any blood or amniotic fluid
  - A piece of gauze wrapped around the index finger may be used to collect tenacious collections of meconium from the mouth, pharynx and nose
- If particulate and/or significant thick meconium were present in the nose and/or mouth, visualize the vocal cords:
  - If particulate matter and/or thick meconium are present on vocal cords or trachea:
    - Suction the trachea
  - If no particulate or meconium is present on the vocal cords or the trachea and the infant is crying:
    - Without signs of respiratory distress:
      - Do not suction the trachea
- Assist ventilations and administer oxygen

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## II-20 DEEP TRACHEAL SUCTIONING OF THE NEONATE (continued)

### Documentation:

- All documentation required for any delivery
- Indications for direct tracheal visualization and suctioning
- Any noted difficulties with procedure
- Any change in the patient's condition
- Airway management following procedure
- PPE and equipment used