



Suctioning

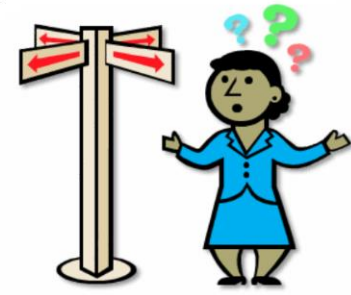
Nasal, Oral & Nasopharyngeal (NP)

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GOALS

Learning Objectives



Where is this going?

- 1) Verbalize when suctioning is necessary.
- 2) Select the correct size suction catheter given the age/size of the patient.
- 3) Demonstrate how to measure the proper suction depth for nasopharyngeal (NP) suctioning.
- 4) Successfully demonstrate on a mannequin the technique of nasopharyngeal (NP), nasal, and oral suctioning.
- 5) Locate the Children's Hospital and Health System Patient Care Policy and Procedure on suctioning.
- 6) Demonstrate correct documentation of suctioning in Epic.
- 7) Understand different techniques of how to sooth patients during suctioning in order to make the experience as comfortable as possible.

Why do we suction?



YES to suction



- * Infants, young children, total care kids who are unable to remove their own secretions
- * Secretion removal for patients with bronchiolitis
 - Bronchiolitis is caused by a respiratory virus (most often RSV)
 - Causes congestion and swelling of the small airways of the lungs

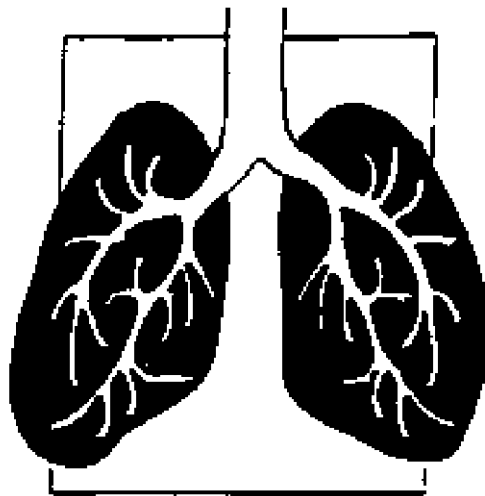
NO to suction



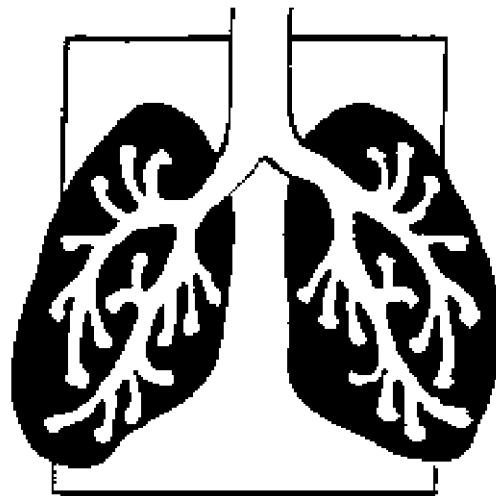
- * Child with a basilar skull fracture
- * Child with suspected croup or epiglottitis
- * Patient who demonstrates adequate ability to clear own secretions
 - Able to spontaneously cough
 - Able to blow nose

Bronchiolitis Lungs

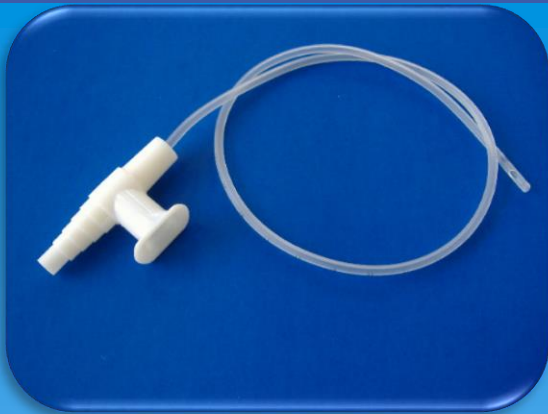
Normal airway



Swollen airway



- * A provider's order is NOT needed for any type of suctioning
- * If unsure due to medical hx (acute head/facial/neck surgery) discuss with provider for risk/benefit assessment



Suction
catheter



Mushroom
tip nasal
aspirator

Suctioning Devices



Yankauer



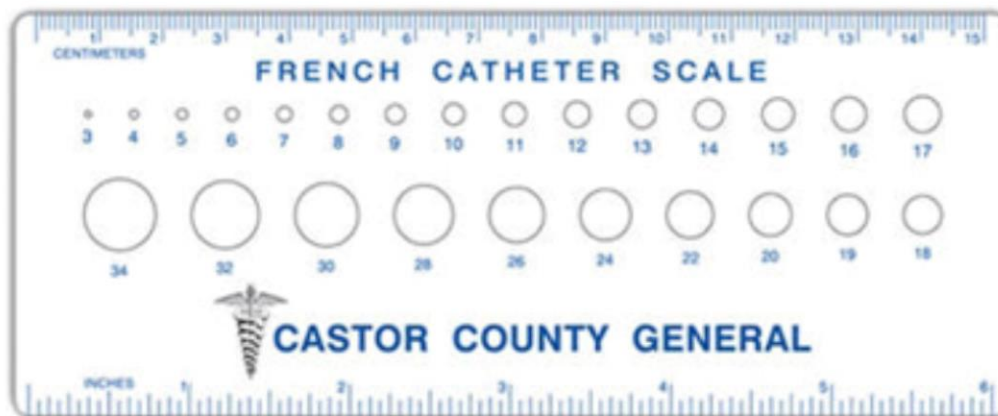
Bulb syringe



Neosucker

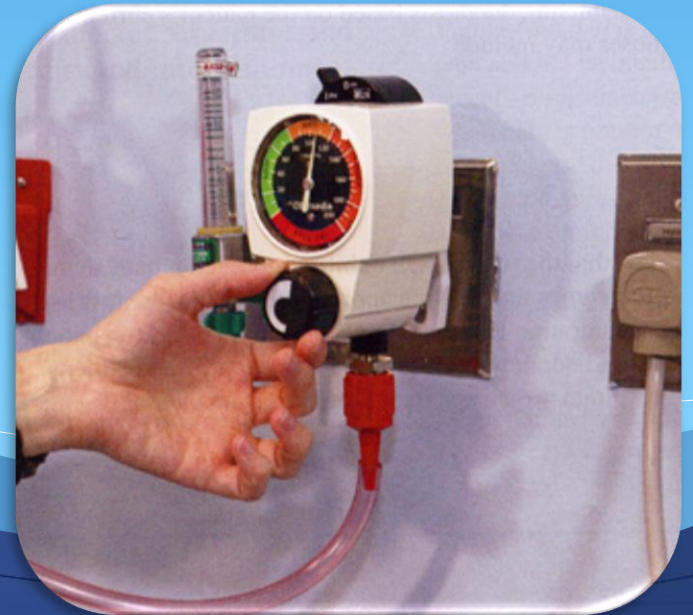


What size catheter should I use?



Age	Catheter Size
Preemie	5/6 fr.
Term Newborn	5/6 – 8 fr.
Newborn – 6 mo.	8 – 10 fr.
1 yr. – 8 yrs.	10 fr.
8 yrs. or older	10 – 14 fr.

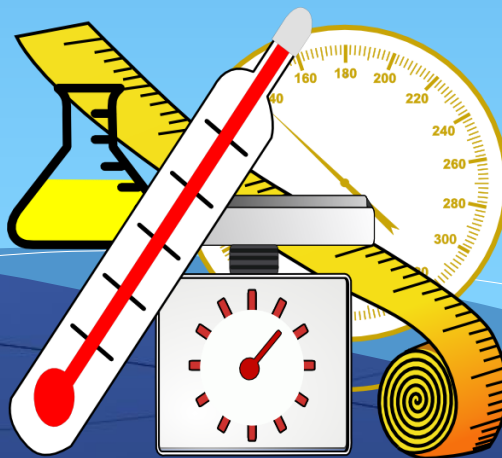
What suction pressure should I use?



Age	Suction Pressure
Neonates	60 – 80 mmhg
Infants	80 – 100 mmhg
Children	100 – 120 mmhg
Adults	100 – 150 mmhg

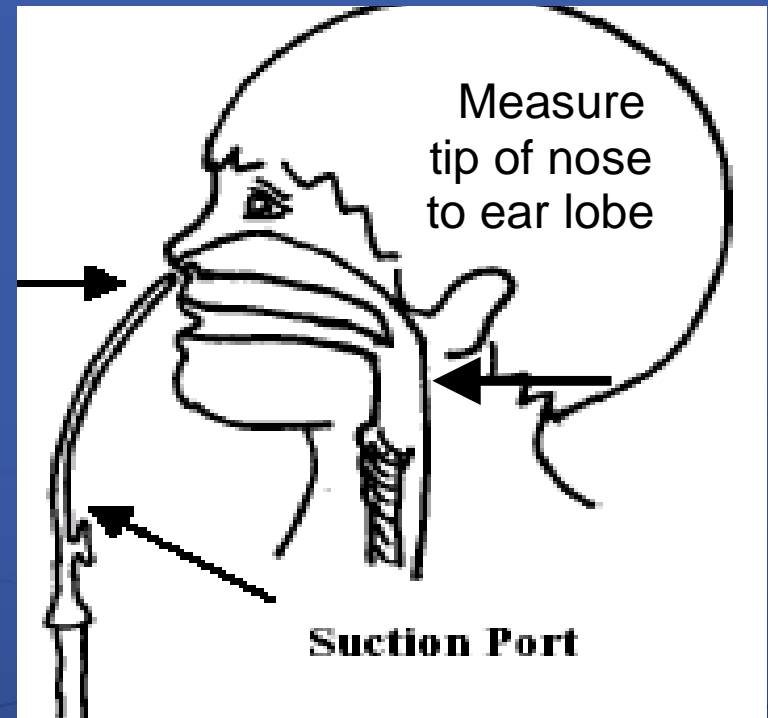


How do I measure for NP suctioning?



Measurement

- * Measure from the tip of the nose to the bottom of the earlobe
- * Note on catheter how many mm this is



Technique



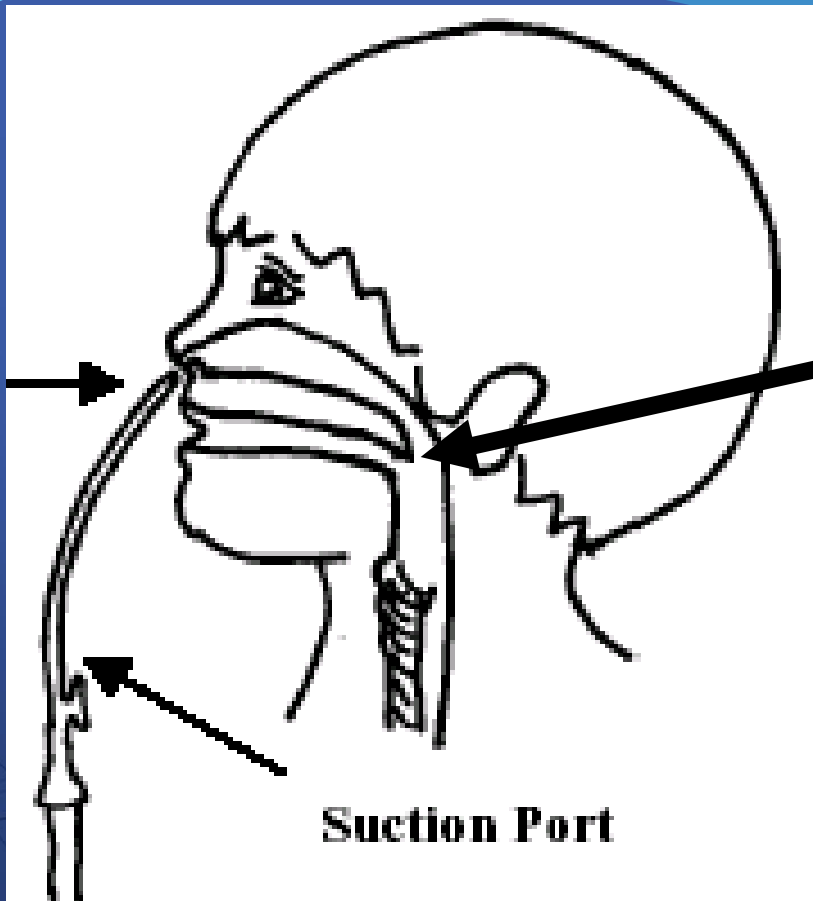
* Materials needed:

- Clean gloves
- Suction catheter
- Facemask with shield
- Surgi-lube
- Saline drops



- * Place 2-3 saline drops in each nostril
- * Lubricate tip of catheter with surgi-lube
- * Insert the catheter down to your measurement
- * Initiate suction by putting thumb over suction port
- * Pull back slowly while moving the catheter in a circular motion

NP Space



Tip of catheter will be here.

- * Tip of the catheter will go into the nasopharyngeal (NP) space = area just above the back of the throat

**What can I do to help
keep my patient
comfortable through this
potentially traumatizing
experience?**



Positioning



- * Allow child position of comfort until you are all set up and ready to suction
- * Restrain only just before and during suctioning
- * Give parents option of being present for support, but don't ask them to restrain child during the procedure
- * Explain procedure to parents if they are present
 - Let them know that their child may scream and cry
- * Make sure you have enough help prior to starting
- * Comfort wrapping/swaddling “like a burrito” or “angel wrap”



Comfort Measures



- * Reassurance, talking, singing, playing music, patting
- * Sucrose pacifier: **Sweet-ease®**
 - All natural, non-pharmacologic intervention made of 24% sucrose and water solution
 - Onset—give at least 2 minutes before procedure
 - Elevates pain threshold, increases calmness, and decreases crying





Case Studies



Case Study #1

- * John is a 28 day-old full term infant, presenting with upper airway congestion and respiratory distress.
 - What size catheter would you consider using for NP suctioning?
 - What suction pressure will you use?
 - What comfort measures would you consider?



Case Study #2



- * Jack is an 8-month old diagnosed with bronchiolitis. He is hospitalized for oxygen needs and frequent suctioning.
 - What size suction catheter would you consider using?
 - What pressure should you set the suction canister to?
 - What comfort measures would you consider using?

Epic Documentation

Epic

What you need to document:



- * Type of suctioning
 - Nasal, oral, NP
- * Frequency/hour
 - Time
- * Amount
 - None, scant, small, medium, large, copious
- * Color
 - Clear, white, yellow, green, red streaks
- * Thickness
 - Thin, thick, frothy
- * How the patient tolerated the procedure
 - Cooperative, crying, resisting



Resources

in·tra·net 'intrə.net
noun Computing

An **internal** web site that helps employees **get things done**.

- * Children’s Hospital and Health System Patient Care Policy and Procedure: Suctioning—Oral—Nasal Secretion Clearance
 - Found on the Intranet under Quick Links “Policies and Procedures”
 - <https://ssl1.chw.org/dana/home/index.cgi>
- * Nasal Suctioning in the Hospital
 - Found on the Intranet under Quick Links “Teaching Materials”



Mini-Quiz!



Question #1

Which of the following patients do you NOT want to NP suction? A patient diagnosed with:

- A. Bronchiolitis
- B. Croup
- C. RSV



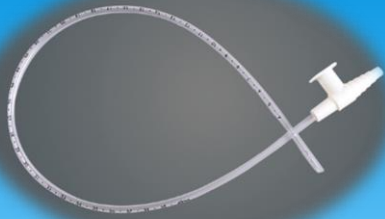


Question #2

A provider's order is needed
for suctioning:

TRUE or FALSE?





Question #3



Which of the following equipment is NOT required for NP, oral, or nasal suctioning?

- A. Saline drops
- B. Sterile gloves
- C. Facemask with shield
- D. Surgi-lube

Question # 4



What is the appropriate way to measure for NP suctioning:

- A. From the tip of the nose to the ear to the xiphoid process
- B. From the bridge of the nose to the clavicle
- C. From the bridge of the nose to the chin
- D. From the tip of the nose to the bottom of the earlobe

Question #5

If you see blood in the secretions that you suction, you should call the doctor immediately.

TRUE or FALSE

Let's Practice!

