

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	8805.12
	PROGRAM DOCUMENT:	Initial Date:	02/01/93
	Intubation: Stomal	Last Approval Date:	11/01/16
		Effective Date:	07/01/21
		Next Review Date:	09/01/22

EMS Medical Director

EMS Administrator

Purpose:

To serve as an advanced life support skill guideline when performing a stomal intubation.

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Indications:

Indications in patients with pre-existing tracheostomy:

- A. Respiratory Arrest.
- B. Hypoventilation.
- C. Loss of gag reflex.
- D. Cardiac Arrest

Equipment:

- A. ~~Manufacturer's Kit.~~ Endotracheal tube:
 - 1. ~~Birth to 12 years~~ Pediatric Patients ≥ 8 years of age, unless age not known, and then only children who meet or exceed the Green length on Handtovy or Broselow length based tapes: appropriate size according to pediatric protocols.
 - 2. ~~5.5 mm and smaller to be cuffless.~~
 - 3. ~~Adults: 7.0 mm – 8.5 mm.~~
- B. ~~Securing device (tape, twill or acceptable commercial device).~~
- C. ~~Syringe 10 ml.~~
- D. ~~Suction apparatus.~~
- E. ~~Bag valve mask with oxygen source.~~

Procedure Policy:

- A. ~~Note proper tube placement and secure tube.~~ Assemble the equipment while continuing ventilation.
 - 1. ~~Continuous waveform capnography shall be utilized.~~ Choose the tube size. NOTE: You may need to use a smaller size tube (6mm or 7mm) if the stoma is constricted.
 - 2. ~~Re-evaluate the position of the tube after each move of the patient and document finding in ePCR.~~ Connect and check suction.

- ~~B. Position patient.~~
- ~~C. Insert the tube through the stoma.~~
- ~~D. Advance the tube until the cuff is just inside the stoma or 5 cm. Insert air into the cuff, if present, to prevent an air leak.~~
- ~~E. Ventilate and watch for chest rise. Listen for breath sounds over stomach (should not be heard) and bilateral lung sounds.~~
- ~~F. If patient is being ventilated; continuous waveform capnography shall be utilized during transport.~~
- ~~G. Note proper tube placement and secure tube.~~
- ~~H. Re-evaluate the position of the tube after each move of the patient.~~

Special Note:

- A. The ET tube does not need to be cut or modified in any way. Doing so may damage the tube and result in a cuff leak.
- B. **If feasible, pull over to perform stomal intubation.**

Cross Reference: Pediatric Airway Management PD #8837
Cardiac Arrest PD #8031
Respiratory Distress: Airway Management PD #8020