TRACHEOSTOMY
A MULTIPROFESSIONAL HANDBOOK
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A MULTIPROFESSIONAL HANDBOOK

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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ACT</td>
<td>Aid for Children with Tracheostomies</td>
</tr>
<tr>
<td>AH</td>
<td>Absolute Humidity</td>
</tr>
<tr>
<td>ASA</td>
<td>American Society of Anesthesiologists</td>
</tr>
<tr>
<td>ASB</td>
<td>Assisted Spontaneous Breathing</td>
</tr>
<tr>
<td>ATC</td>
<td>Automatic Tube Compensation</td>
</tr>
<tr>
<td>BiPAP</td>
<td>Biphasic Positive Airway Pressure</td>
</tr>
<tr>
<td>BLS</td>
<td>Basic Life Support</td>
</tr>
<tr>
<td>CCN</td>
<td>Children's Community Nursing</td>
</tr>
<tr>
<td>CHART</td>
<td>Continuous Hyperfractionated Accelerated Radiotherapy</td>
</tr>
<tr>
<td>COPD</td>
<td>Chronic Obstructive Pulmonary Disease</td>
</tr>
<tr>
<td>CPAP</td>
<td>Continuous Positive Airway Pressure</td>
</tr>
<tr>
<td>CSF</td>
<td>Cerebral Spinal Fluid</td>
</tr>
<tr>
<td>DISS</td>
<td>Diameter Safety System</td>
</tr>
<tr>
<td>DLA</td>
<td>Disability Living Allowance</td>
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<tr>
<td>EBRT</td>
<td>External Beam Radiotherapy</td>
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<tr>
<td>FEES</td>
<td>Fiberoptic Endoscopic Evaluation of Swallowing</td>
</tr>
<tr>
<td>FRC</td>
<td>Functional Residual Capacity</td>
</tr>
<tr>
<td>HAI</td>
<td>Hospital Acquired Infection</td>
</tr>
<tr>
<td>HCAI</td>
<td>Health Care Acquired Infection</td>
</tr>
<tr>
<td>HCP</td>
<td>Health Care Professional</td>
</tr>
<tr>
<td>HCWs</td>
<td>Health Care Workers</td>
</tr>
<tr>
<td>HHME</td>
<td>Hygroscopic Heat and Moisture Exchanger</td>
</tr>
<tr>
<td>HHMEF</td>
<td>Hygroscopic Heat and Moisture Exchanging Filter</td>
</tr>
<tr>
<td>HME</td>
<td>Head and Moisture Exchanger</td>
</tr>
<tr>
<td>HMEF</td>
<td>Heat and Moisture Exchanging Filter</td>
</tr>
<tr>
<td>HVLP</td>
<td>High-Volume Low-Pressure Cuffs</td>
</tr>
<tr>
<td>ILMA</td>
<td>Intubating Laryngeal Mask Airway</td>
</tr>
<tr>
<td>ISB</td>
<td>Isothermic Saturation Boundary</td>
</tr>
<tr>
<td>LMA</td>
<td>Laryngeal Mask Airway</td>
</tr>
<tr>
<td>MDR-TB</td>
<td>Multi-Drug-Resistant <em>Mycobacterium tuberculosis</em></td>
</tr>
<tr>
<td>MLT</td>
<td>Minimal Leak Technique</td>
</tr>
<tr>
<td>MOV</td>
<td>Minimal Occlusive Volume</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>---------</td>
<td>-------------</td>
</tr>
<tr>
<td>MRSA</td>
<td>Methicillin-Resistant <em>Staph. aureus</em></td>
</tr>
<tr>
<td>MSSA</td>
<td>Methicillin-Sensitive <em>Staph. aureus</em></td>
</tr>
<tr>
<td>MTB</td>
<td><em>Mycobacterium tuberculosis</em></td>
</tr>
<tr>
<td>NBM</td>
<td>Nil by Mouth</td>
</tr>
<tr>
<td>NPPV</td>
<td>Non-invasive Positive Pressure Ventilation</td>
</tr>
<tr>
<td>PDT</td>
<td>Percutaneous Dilatational Tracheostomy</td>
</tr>
<tr>
<td>PEEP</td>
<td>Positive End Expiratory Pressure</td>
</tr>
<tr>
<td>PEG</td>
<td>Percutaneous Entero-Gastrostomy</td>
</tr>
<tr>
<td>PICU</td>
<td>Paediatric Intensive Care Unit</td>
</tr>
<tr>
<td>PPE</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td>Ppl</td>
<td>Intrapleural Pressure</td>
</tr>
<tr>
<td>PSV</td>
<td>Pressure Support Ventilation</td>
</tr>
<tr>
<td>RH</td>
<td>Relative Humidity</td>
</tr>
<tr>
<td>RSV</td>
<td>Respiratory Syncytial Virus</td>
</tr>
<tr>
<td>SEN</td>
<td>Statement of Education Needs</td>
</tr>
<tr>
<td>SIMV</td>
<td>Synchronised Intermittent Mandatory Ventilation</td>
</tr>
<tr>
<td>SLT</td>
<td>Speech and Language Therapist</td>
</tr>
<tr>
<td>vCJD</td>
<td>variant Creutzfeldt-Jakob Disease</td>
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PREFACE

A multidisciplinary team approach has improved the care of patients with tracheostomies. These dedicated teams, comprised of doctors, nurses, speech therapists, physiotherapists and dietetic staff, have to work closely and in a co-ordinated collaborative manner to ensure all the needs of these patients are met so that outcomes are optimised. In this handbook, we have outlined upper airway and respiratory basic anatomy and physiology, how it is altered by the introduction of a tracheostomy. Where possible, we have based our management plans on high quality evidence and outcome research. However, in many instances, such data is lacking and the treatment plans we have provided are inevitably tinged with local bias.

Claudia Russell
Basil Matta
January 2004
ACKNOWLEDGEMENT

We would like to thank all the contributors who have devoted their time to produce their chapters on time. We would also like to thank Greenwich Medical Media for their patience, belief in the project and for agreeing to take on this project. We must not forget several manufacturers who have willingly answered endless queries and requests about tracheostomy products. In particular, our special thanks goes to Sims Portex Ltd, Kapitex Healthcare Ltd, Tyco Healthcare and Rüsch Ltd for providing the illustrations, photographs, technical data and their excellent support from their sales and marketing staff.