

SKILLS ASSESSMENT FORM - CUFFED TUBE

Demonstrate the following:	Performed with Supervision	Performed Procedure Safely
Humidification		
Delivering Humidification via AIRVO/AIRVO2 Humidifier		
Before placing humidification:		
 Wash hands 		
 Clean gloves on both hands 		
 Prepare the humidification unit; place distilled water in the 		
humidification base chamber to the appropriate level		
 Ensure the heated breathing tube is attached to the Airvo unit and the 		
direct connector is attached to the breathing tube		
 Plug the Airvo in, then turn it on and wait for the 'Ready to use' signal 		
Tell the client what you are going to do		
Place the tracheostomy direct connector on the end of the tracheostomy tube		
When the client wakes up in the morning:		
 The direct connector is detached from the client 		
 The blower and the heater base are turned off and the 99 min drying cycle is activated 		
 The direct connector is disconnected, washed and hung to dry 		
The carer can troubleshoot/discuss the following:		
 Distilled water is not available 		
The equipment is not working		
 The humidification base chamber is empty 		
Heat Moister Exchange (HME)		
Before placing/removing HME:		
Wash hands		
Don PPI (carers only)		
Ensure the HME is in good condition		
Tell the client what you are going to do		
Place the HME directly on the hub of the tracheostomy tube		
Troubleshoot/discuss the following:		
Paper HME becomes wet		
 Paper HME filter falls out of plastic casing 		
 Copious secretions collect inside HME How to clean the foam HME 		
- How to clean the loan mile		
Nebuliser Defended in a the maleuliser		
Before placing the nebuliser:		
Wash hands Clean gloves on both hands		
 Clean gloves on both hands Prepare the nebuliser unit, the clear tubing is attached to the nebuliser 		
unit, then the nebuliser kit is attached to the other end of the clear		
tubing		
 Fill the nebuliser kit with normal saline with the appropriate amount 		
 Connect the tracheostomy mask to the nebuliser kit 		
Tell the client what you are going to do		
Place the mask over the client's tracheostomy tube		
Turn on the nebuliser unit		

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After the completion of the nebuliser:	
 The nebuliser unit is turned off 	
 The mask is detached from the client, washed, hung to dry 	
The carer can troubleshoot/discuss the following:	
 The required times of delivering the Normal Saline nebuliser 	
 When to cease nebulisation 	
 The equipment is not working 	
Tracheostomy Tube with Inner Cannula	
Before placing the inner cannula:	
Wash hands	
Clean gloves on both hands	
Tell the client what you are going to do	
Insert and remove the inner cannula appropriately	
After the insertion of the inner cannula:	
 The inner cannula is cleaned, dried and placed in the airtight container 	
 The cleaning brush is used appropriately 	
The carer can troubleshoot/discuss the following:	
 When to place the inner cannula 	
 When to remove the inner cannula 	
 When to discard the cleaning brush 	
What to do if the inner cannula is broken	
Cuff Deflation/Inflation with Suction Aid Tracheostomy Tube	
Before proceeding:	
Wash hands	
Clean gloves on both hands	
Cuff deflation:	
Tell the client what you are going to do	
Using a 10mL syringe remove the secretions from above the cuff via the	
suction aid line	
Using a clean 10mL syringe, slowly deflate the cuff via the blue pilot line	
Cuff inflation	
Tell the client what you are going to do	
Using a 10mL syringe, insert 6mls of air into the pilot line	
Check pressure using a manometer	
Add or remove additional air in 1ml increments to achieve adequate seal	
Note	
o pressure must be between (20-30cmH2O)	
o each time the manometer is placed on the pilot line, a small	
amount of air will escape	
The carer can troubleshoot/discuss the following:	
How to unblock the suction aid line	
What to do if the suction aid line is blocked	
When the cuff should be deflated/inflated What is the cities of an angle of a control of the control of t	
What is the risk of an under or over-inflated cuff Sustaining	
Suctioning Pefere proceeding:	
Before proceeding:	
Wash hands Clean gloves on both hands (double gloved in the dominant hand)	
Clean gloves on both hands (double gloved in the dominant hand) Tall the client what you are going to do.	
Tell the client what you are going to do	
 Prepare the suction unit, check the pressure gauge and the suction unit 	
is working Attach the catheter to the suction tubing without removing catheter	
 Attach the catheter to the suction tubing without removing catheter 	
from the packaging	
Turn on the suction unit	
Remove catheter from packaging and avoid contact with other objects	
Remove HME from the tracheostomy tube	
Commence suctioning	

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After suctioning the client:	1	
After suctioning the client: • The suction catheter and gloves are placed in the rubbish bag		
The suction tubing and jar are cleaned		
The carer can troubleshoot/discuss the following:		
When to suction the client		
 What to do if the equipment is broken 		
 What happens to the client when if over suctioned 		
PMV		
Before proceeding:		
Wash hands		
 Clean gloves on both hands 		
In a cuffed tracheostomy tube:		
Tell the client what you are going to do		
 Remove secretions from above the cuff (via suction aid line if present) 		
Deflate the cuff		
Suction the client via the tracheostomy tube		
Place the PMV using quarter clockwise turn		
Monitor closely for signs of distress		
The carer can trouble shoot/ discuss the following:		
Rationale for deflating cuff prior to PMV use		
When to avoid PMV use		
Wireli to avoid i wiv use Warning signs of distress/intolerance		
Cleaning instructions		
• Cleaning histractions		
Stoma Care		
Before proceeding:		
Wash hands		
Clean gloves on both		
Tell the client what you are going to do		
 Prepare the required consumables 		
 Remove old dressing and dispose in the rubbish bag 		
Clean the stoma site		
Placing the tracheostomy tapes:		
 While one carer holds the tracheostomy tube, the other carer removes 		
the tracheostomy tape		
 Replace the tape and ensure it is firmly keeping the tracheostomy tube 		
in place		
 Place a dressing around the tracheostomy tube 		
After the procedure:		
 Clean the area and discard all rubbish 		
The carer can troubleshoot/discuss the following:		
 When to do the stoma care 		
 When to replace the dressing 		
 What to do if there is skin breakdown, redness or inflammation around 		
the stoma site		
Emergency Care		
Demonstrates what to do:		
When the tracheostomy is blocked		
When the tridenessionly is blocked When the patient is having trouble breathing		
When the patient is flaving trouble breathing When the patient's tracheostomy tube has fallen out		
- which the patient 5 tracheostomy tube has fallen out		

Carer's Name and Signature	
Assessor's Name and Signature:	
Date Carer Passed Training:	
If not passed, date for re assessment made:	_
Comments:	