

UR: \_\_\_\_\_

Surname: \_\_\_\_\_

Given Name(s): \_\_\_\_\_

Date of birth: \_\_\_\_\_

Affix Patient Label Here

# Use of the Bivona Tight To Shaft (TTS) Tracheostomy Tube

## TUBE INFORMATION

- The Bivona Tight to the shaft (TTS) tracheostomy tube is made of soft silicone material which conforms easily to the users anatomy.
- The cuff of the Bivona TTS is a high pressure low volume cuff so is not recommended for those who have their cuff inflated for most of the day.
- The tight to the shaft cuff contracts tightly around the shaft of the tube when deflated. This reduces resistance to airflow around the tube, facilitating speech.
- The Bivona TTS is a single patient item that can be sterilised and reused up to 10 times.



**Attention: Water Filled Cuff**

## CUFF INFLATION

- The cuff of the Bivona TTS is filled with **WATER** not air. A nominated amount of sterile water or water for irrigation is introduced into the pilot line using a 10mL non luer lock syringe.

Volume of water in cuff: \_\_\_\_\_ mLs

## CLINICAL ALERTS

- The Bivona TTS is a single lumen tube, care should be taken to avoid secretions collecting in the tube causing blockage.
- Avoid use of this tube in patients with minimal cuff down time. The cuff is a low volume, **high pressure** design.
- The cuff on this tube is filled with **water not air**. Air will leak out of the cuff over time and it will deflate.
- Cuff pressure can NOT be measured with a manometer. Record the number of mLs required to achieve an airtight seal using the minimal occlusive volume (MOV) technique. (Contact TRAMS if further information is required)
- Do not use an inner cannula in this tube.

## CONTACT

\_\_\_\_\_ Clinician \_\_\_\_\_ Pager

or TRAMS pager 1291