

# Schedule of Passy-Muir Valve (PMV) Use in Spontaneously Breathing Patients

## Patient's details:

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

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

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

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

*Affix Patient Label Here*

## Clinical Instruction Sheet

Austin Health

Note: Clinicians should read the Tracheostomy Clinical Procedure: *Speaking Valves in spontaneously breathing patients*, in addition to this Clinical Instruction Sheet

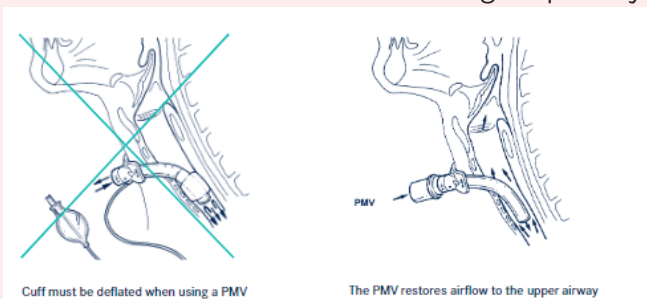
**This patient has been assessed for use of the PMV**

## Tube Information

- The Passy-Muir Valve (PMV) is a one-way valve that attaches to the hub of the tracheostomy tube and **must only be used with a cuffless tube or with the cuff fully deflated**.
- When the valve is on, airflow through the upper airway is restored.
- PMV use enhances the ability to voice, cough and swallow.

## Clinical Alerts

- **Only staff who have completed PMV training should place the valve**
- **The cuff must always be deflated when a PMV is on.** Failure to deflate the cuff can result in respiratory compromise/ distress and death
- Remove the PMV when the patient is sleeping
- Remove the PMV if the patient exhibits increased work of breathing, respiratory distress or desaturation



## Placing a PMV

- Assess the patient for suitability for PMV placement on each occasion
- Explain the procedure to the patient
- Suction: above the cuff (if a Suctionaid tracheostomy tube is insitu), via the mouth and trachea as required
- **Completely deflate the cuff**
- Finger occlude the tracheostomy tube and ask the patient to voice
- If the patient is unable to voice, encourage throat clearing, as they may need further suctioning
- If the patient still cannot voice, do not use the PMV. Contact the Speech Pathologist
- If the patient is able to voice via finger occlusion, place the PMV on the tracheostomy hub using a quarter clockwise turn

Schedule of PMV use: \_\_\_\_\_

## Contact

Speech Pathologist : \_\_\_\_\_ TEAMS/ pager \_\_\_\_\_ or TRAMS phone 3095

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