Emergency Tracheostomy Management and CPR for families

D 
**Danger**

- Check for dangers to yourself or the child.
- If safe to do so, remove the danger, or remove the child from the danger.

R 
**Response**

- Check for a response by touching and talking to the child, call their name.
- If they do not respond to touch/talk, firmly pinch the top of their ear.

S 
**Send for help**

- If there is no response, immediately call triple zero (000) for an ambulance.

A 
**Airway**

- Check the child can breathe through their tracheostomy tube.
- Check the tube is in place. Tilt child’s head back slightly (place small roll under shoulders) to see if the tube is still in the stoma.
- Remove any attachments (e.g. humidifier, speaking valve).
- Use suction catheter to clear the tracheostomy tube. If you can’t pass the suction catheter, change inner cannula (if one present); or remove tracheostomy tube (deflate cuff if needed) and replace with same-sized tube.
- If unable to insert same-sized tube, replace with a smaller tube using water-based lubricant.
- If still unable to insert tube, thread suction catheter through smaller tube and use to guide in to the stoma.

B 
**Breathing**

Look, listen and feel for chest and air movement.

If not breathing and:

- Tracheostomy _tube in place_, give two breaths into tube using bag, one-way valve, or mouth.

OR

- Tracheostomy _tube not in place_, give two breaths into nose and mouth using bag and mask, or mouth to nose-and-mouth. Cover tracheostomy stoma with gauze and tape if required to prevent air leak.

OR

- If child has a blocked upper airway and no tube in place, give two breaths into stoma using bag and mask.

C 
**Circulation**

- Check for breathing and signs of life (moving, breathing, responsive).
- If no signs of life, start CPR: 30 compressions on centre of chest, followed by two breaths (at a rate of 120 compressions per minute).
- Continue CPR until child shows signs of life or ambulance arrives.