PATIENT & CAREGIVER EDUCATION

Caring for Your Child's Tracheostomy

This information will help you care for your child's tracheostomy in the hospital and at home. In this resource, the words "you" and "your" refer to you or your child.

About your trachea

Your trachea (windpipe) is part of your respiratory system. It's about 4½ inches (11 centimeters) long and is at the front of your neck (see Figure 1). It runs from your larynx (voice box) to your lungs.

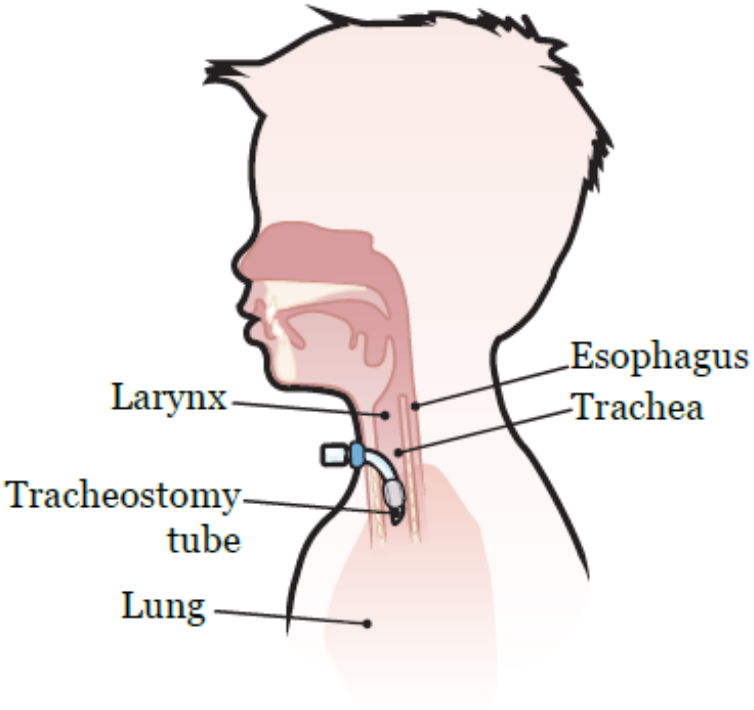


Figure 1. Tracheostomy tube placement

When you breathe, air travels from your nose or mouth into your larynx, through your trachea, and into your lungs. This path is called your airway.

About your tracheostomy

A tracheostomy is a surgical opening in your trachea. It makes breathing easier and protects your airway from being blocked. You may need a tracheostomy if:

- A tumor is blocking or narrowing your airway.
- Secretions (mucus) are blocking or narrowing your airway.
- You have swelling that blocks or narrows your airway. This swelling may be caused by surgery, radiation

therapy, a serious infection, or abscess (a pocket of pus caused by an infection).

- There is a problem with your vocal cords. You need an emergency airway for any reason.

Your tracheostomy may be temporary or permanent. Your healthcare provider will talk with you about how long you'll need it.

About your tracheostomy tube

A tracheostomy tube is a hollow tube that's put in your trachea to keep it from closing. Once you have a tracheostomy, you'll need to wear a tracheostomy tube all the time.

Right after your surgery, you may have sutures (stitches) keeping your tracheostomy tube in place. Once they're removed, you'll use a tracheostomy tie (see Figure 2). A tracheostomy tie goes around the back of your neck. It's attached to each side of your tracheostomy tube to keep it in place.

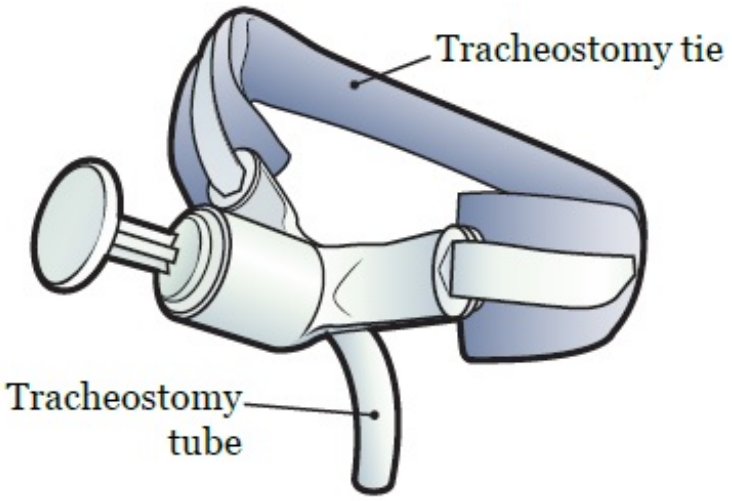


Figure 2. A tracheostomy tube and tie

There are 2 types of tracheostomy tubes (see Figure 3):

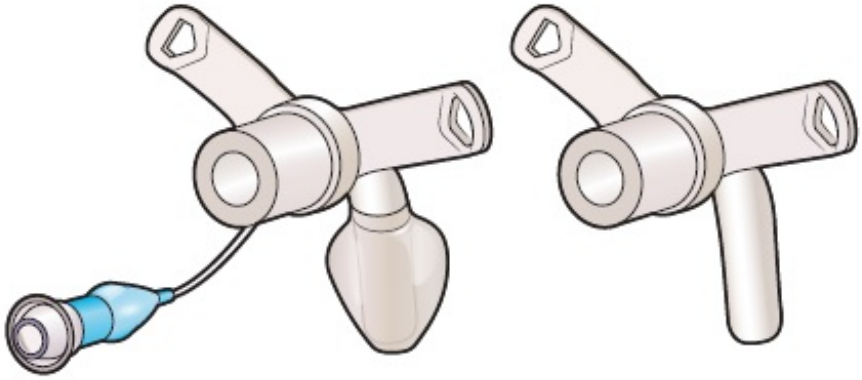


Figure 3. A cuffed tracheostomy tube (left) and uncuffed tracheostomy tube (right)

- **A cuffed tube**. You'll have this if you're getting a tracheostomy for the first time or if you're on a ventilator. A cuffed tube keeps air from escaping around the tracheostomy.
- **An uncuffed tube**. You'll have this if your airway is stable and you don't need a cuffed tube anymore.

Communicating with a tracheostomy

While you have a tracheostomy, you won't be able to speak as usual. A tracheostomy tube limits airflow through your trachea, so your cry may be weak or absent. Many people can speak by covering the opening in their tracheostomy tube with a finger. Your nurse will teach you how to do this. They'll also give you a pen and paper or a picture board to help you communicate.

Protecting your airway

Protect your airway at all times while you have a tracheostomy.

- Keep the tracheostomy tube opening free of obstruction
  - Supervise play to make sure toys, fingers, and food are kept away from the tracheostomy tube opening.
  - Avoid clothing that may cover the tracheostomy tube opening.
  - Avoid fuzzy blankets or clothing that may shed fibers, such as fleece.
- Keep water out of your tracheostomy tube.
  - Do not submerge yourself under water (such as in a bathtub or pool).
  - Do not go swimming while your tracheostomy tube is

in place. After the tube is removed, do not go swimming until your tracheostomy is completely closed.

    - When you shower, keep water from spraying splashing directly into your tracheostomy. Direct the water so it hits beneath your neck or face away from the water.

- Avoid things that can irritate or enter your airway, such as sprays, powders, dust, tobacco smoke, other fumes, and sand.

Caring for your tracheostomy

While you're in the hospital, your nurse will teach you how to care for your tracheostomy. You'll learn how to:

- **Suction your tracheostomy tube.** This clears the secretions from your airway so it's easier to breathe.
- **Clean the suction catheter.** This helps prevent infection.
- **Clean your skin around your tracheostomy.** This helps keep it from getting irritated.
- **Changing your tracheostomy tie.** This helps keep it clean and secure.
- **Moisturize the air you breathe.** This helps loosen your secretions so they're easier to suction.

- **Handle an emergency.**

It's important to use a humidifier while you have a tracheostomy, especially at night. This will help keep your secretions loose so they don't clog your tracheostomy tube.

If you're discharged from the hospital with your tracheostomy, you'll care for it at home. You'll get the supplies you need before you're discharged from the hospital. You may also have a nurse visit you at home to help. Your care team will plan these things with you.

Make sure to bring your tracheostomy supplies with you when you travel.

You can use the following instructions to help you remember how to care for your tracheostomy.

How to suction your tracheostomy tube

Your nurse will tell you how often to do this.

1. Gather your supplies. You'll need:
    - 1 suction machine with plastic tubing
    - 1 suction catheter
    - 1 bowl or large cup filled with water
    - 2 to 4 dry gauze pads

- 1 clean, dry cloth or paper towel
- Gloves

2. Clean your hands well with soap and water or an alcohol-based hand sanitizer.
    - If you're using soap and water, wet your hands and apply soap. Rub your hands together well for at least 20 seconds, then rinse. Dry them with a paper towel and use that same towel to turn off the faucet.
    - If you're using an alcohol-based hand sanitizer, be sure to cover all parts of your hands with it, then rub them together until they're dry.
3. Open the package with the suction catheter. Connect the suction catheter to the plastic tubing of the suction machine.
4. Turn on the suction machine. (If you're in the hospital, open the clamp on the suction tubing instead).
5. Put on a pair of clean gloves.
6. Block the suction catheter.
    - If the suction catheter has a hole on it, make sure you're not covering the hole.
    - If the suction catheter doesn't have a hole on it, pinch it between your thumb and pointer finger.
7. Cough deeply to bring up any secretions.

8. Keep the suction catheter pinched or leave the hole uncovered. Place the catheter into your tracheostomy tube. Your nurse will teach you how far in to place it. Un-pinch the suction catheter or place your thumb over the hole in the catheter to start suctioning. **Do not keep the suction catheter in your trachea for longer than 10 seconds. Keeping it in too long can cause shortness of breath.**
9. Using a rotating motion, slowly pull the suction catheter out of your tracheostomy. Rotating the catheter helps it suck up secretions on all sides of your trachea and tracheostomy tube.
0. Wipe the secretions from the outside of the suction catheter with dry gauze.
11. Rinse the secretions from the inside of the suction catheter by suctioning the water through it.

Repeat these steps if you feel you have more secretions that need to be cleared out. If you need to suction more than 2 or 3 times, rest for a few minutes before starting again.

Once you're done:

1. Make sure the suction catheter and plastic tube are clean. Rinse and wipe the outside and suction water

through the inside to clean them, if needed.

2. Disconnect the suction catheter from the plastic tubing on the suction machine.
3. Place the suction catheter on the dry cloth or paper towel.
4. If you're at home, empty the secretions from the inside of the suction machine into the toilet. Do not empty them into the sink. They can clog the drain. In the hospital, a staff member will do this for you.

While you're at home, change the suction catheter at least once a week or more often if it's dirty or clogged. If you're in the hospital, use a new one each time. Some insurance companies pay for one catheter per day. Check with your insurance company.

Clean the suction machine's canister with soap and water after emptying it.

How to change your child's tracheostomy tie and clean the skin around their tracheostomy

Remove and inspect your child's tracheostomy tie every day. You may need to clean around their tracheostomy and under the tie more than once a day, depending on the skin's condition. If the skin is cut, painful, red, irritated, or smells, call their healthcare provider's office.

You'll need to have a second caregiver with you to help change your child's tracheostomy tie. One caregiver will hold your child's tracheostomy in place. The other will clean their neck. Your child's healthcare provider will teach both caregivers how to do this.

1. Gather your supplies. You'll need:
    - A new tracheostomy tie. Make sure to cut it to the length you need before you start.
    - 4 to 6 cotton swabs (or as many as needed)
    - Soap or baby wash and water
2. Both caregivers should clean their hands well with soap and water or an alcohol-based hand sanitizer.
3. Inspect your child's tracheostomy to see if it needs suctioning. If it does, suction the tracheostomy following the steps in the "How to suction your tracheostomy tube" section.
4. Make sure your child is lying down and comfortable.
5. Gently clean the skin around the tracheostomy tube with moistened cotton swabs.
6. Gently dry the skin. Check for any rashes, drainage, or cuts. If you see any, call your child's healthcare provider.
7. Loosen one side of the tracheostomy tie. Slide it under your child's neck.

8. While the second caregiver holds the tracheostomy tube in place, remove the other side of the tracheostomy tie.
9. Pick up the new tracheostomy tie. Gently attach one end to one side of the tracheostomy tube. Slide the other end under your child's neck and attach it to the other side of the tracheostomy tube.
0. While one caregiver holds the tracheostomy tube in place, the other caregiver can adjust the Velcro at the back of your child's neck. Do not make the tracheostomy tie too tight. You should only be able to place 1 finger under it (see Figure 4).

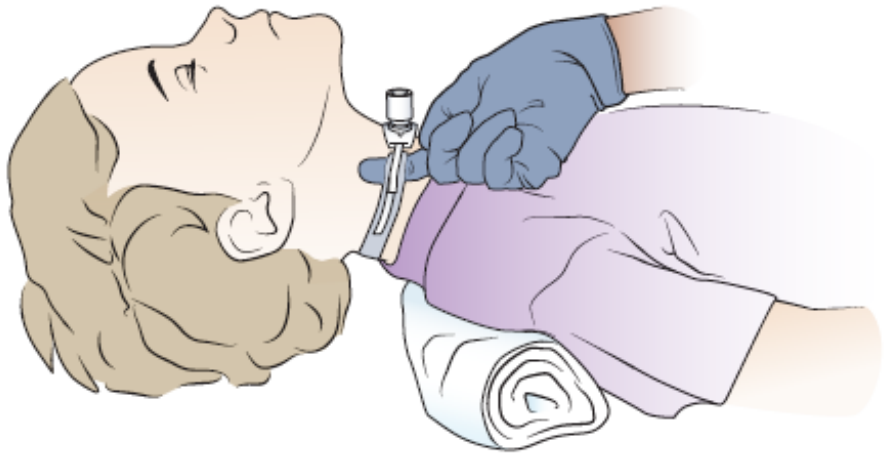


Figure 4. Fitting 1 finger under the tracheostomy tie

11. Check your child's tracheostomy to see if it needs suctioning. If it does, suction it again.

Your child's healthcare provider will teach you how to

change your child's tracheostomy tube before you leave the hospital. If your child will have their tracheostomy for a longer time, their healthcare provider will change their whole tracheostomy tube during office visits.

How to moisturize the air you breathe

Moisturizing the air you breathe will help loosen secretions so they're easier to suction. When you're not on a ventilator anymore, you'll use a tracheostomy collar or heat and moisture exchanger (HME) (see Figure 5). These moisturize the air you breathe and protect your airway while you have a tracheostomy. Your nurse will give you more information about these devices and how to use them.

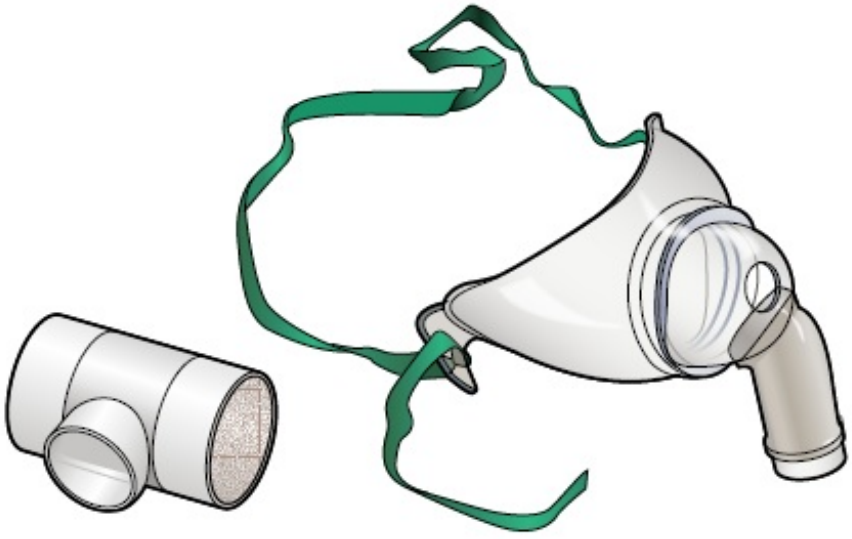


Figure 5. A HME (left) and tracheostomy collar (right

Eating with your tracheostomy

While you have a tracheostomy, you may get nutrition through a feeding tube. You may also be able to eat by mouth. It may take time to adjust to eating, and you may need changes such as taking smaller bites. Talk with your medical team and speech-language pathologist to make sure you can eat safely and choose foods that are right for you.

Your sense of taste and smell may be reduced because less air passes through your mouth and nose. Continue eating foods with familiar tastes and smells.

Follow these tips when eating:

- **For infants:** Do not prop the bottle or leave your baby alone with a bottle. Burp your baby well after feeding. Use a cloth bib if needed.
- **For older children**: Place a cloth bib over the tracheostomy tube if food may spill onto it. Do not use a plastic bib.
- Continue routine mouth care and brush your teeth as recommended.

Removing your tracheostomy tube

Your healthcare provider will remove your tracheostomy tube when you don't need it anymore.

Before they remove your tracheostomy tube, your healthcare provider will order a cap to place over it. The cap will block your tracheostomy so you breathe normally through your nose and mouth. If you can breathe normally with the cap in place, your healthcare provider will remove your tracheostomy tube. You won't feel any pain when it's taken out.

After your tracheostomy tube is removed, your tracheostomy opening will close on its own. You won't need surgery or sutures.

Your healthcare provider will put a dressing (bandage) over your tracheostomy site.

- Keep the dressing on until your tracheostomy is completely closed. This usually takes about 1 to 2 weeks.
- Change the dressing twice a day or more often if it gets dirty. Each time you change it, clean your skin underneath with moistened pieces of 4-inch by 4-inch (4x4) gauze.
- Put your finger over the dressing when you cough or speak. This will help your tracheostomy close.

Once your tracheostomy is closed, you won't need to wear a dressing. Your healthcare provider will tell you when this is.

Important points

- If you have trouble breathing, suction your tracheostomy. If it gets easier to breathe, your tracheostomy was probably clogged. **If your breathing doesn't get better, call 911 or go to the nearest emergency room right away.**
- If your whole tracheostomy tube comes out by accident, do not panic. Your tracheostomy will stay open for hours to days. Your healthcare provider will teach you how to put your tracheostomy tube back in place. They'll also teach you how to use a bag and mask to help you breathe if needed. **Call 911 or go to the nearest emergency room right away to have your tracheostomy checked.**
- If you vomit, lightly cover the opening of your tracheostomy tube to keep vomit or food from getting inside.
    - If you think vomit or food got into your tracheostomy tube, suction right away.
- Always keep your emergency bag in the same place so everyone knows where to find it. Bring it with you every

time you leave home.

- Your bag should include:
  - A spare tracheostomy tube and one that is one size smaller
  - Obturator
  - Correct size inner cannula (if needed)
  - Spare tracheostomy ties
  - Surgical lubricant
  - Suction catheters
  - Surgical gloves
  - Portable suction
  - Sterile water
  - Tracheostomy cleaning supplies
  - Emergency phone numbers
  - Airway card with tracheostomy information

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

Caring for Your Child's Tracheostomy - Last updated on August 17, 2026

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