

Tracheostomy bleeding

Lightly blood-stained secretions only?



Early (days 1-3) – likely benign - observe

Late (after day 3) – senior review

Significant frank blood?

Call for help



1. ICU consultant and senior nursing staff
2. ENT surgeon – on call consultant at John Radcliffe will coordinate. May also be one in clinic or theatre on site (put days here)
3. General surgeon
4. Senior anaesthetist

100% oxygen



Or high flow via trachy mask

Inflate cuff



Temporary over-inflation can be considered (usually at least 20 ml (for Portex tubes)

Sit nearly fully upright



45 degrees if hypotensive

Suction via tracheostomy



Large gauge catheter to retrieve clots

Attach water's circuit or self-inflating bag, and end-tidal monitoring



Consider assisting ventilation or take over

Finger pressure in sternal notch or at bleeding point if obvious



If heavily sedated, consider packing pharynx

Suction pharynx



Remove clots

Next measures



1. Kaltostat or adrenaline-soaked ribbon gauze - tuck into trachy wound.
2. Inject lidocaine + adrenaline 1:200,000 around trachy site.
3. Sedation if coughing is excessive or struggling with ventilation (+/- muscle relaxant)
4. Correct known coagulopathy or reverse anticoagulants where possible

Bleeding still through tracheostomy despite cuff inflation?

Profuse?



Consider intubation via mouth and:

- distal balloon placement
- Intentional endobronchial intubation
- double-lumen tube
- bronchial blocker.

Or consider palliation.

Not profuse but not settling?



Adrenaline nebs
IV +/- nebulized tranexamic acid.
Consider plans as for profuse bleeding.

Haemostasis achieved?



Bronchoscopy and upper airway scope
CXR
Physiotherapy
Consider possibility that it was a 'herald bleed' (re TIF below)

Causes

Early

- Suction or movement of tracheostomy

Late

- Granulation tissue
- Stoma site infection
- Tracheo-innominate fistula

Also consider:

- Bleeding from non-trachy surgical site if present and nearby.
- Upper respiratory tract bleeding (eg epistaxis)
- Haemoptysis unrelated to tracheostomy