GUIDELINE FOR USING ORAL SUCTION

Aim: To ensure that all persons required to administer oral suction are aware of the recommended procedure, including the use of the different types of suction machines provided by the Southern Derbyshire Equipment Services (Nottingham Rehabilitation Services and Medequip)

Background: The Adult Community Respiratory Physiotherapy Service was frequently being asked to demonstrate the procedure for oral suction to other members of staff/carers. It was therefore considered appropriate for written guidance to be developed

Clinical Speciality: Respiratory Physiotherapy

Intended users: Qualified and non-qualified health and social care staff (NHS & Private Agencies), carers and relatives who have received the appropriate training / annual update from Provider Services

Target Population: Adults or children who have been identified to require oral suction

Indications: Inability to expectorate sputum/saliva/aspirate from the back of the mouth/throat, the presence of which is causing an obstruction or discomfort

Definition: The insertion of a Yankauer suction catheter into the mouth in order to remove sputum, saliva or aspirate

Consent (Please refer to PCT Policy on Consent)

This must be obtained from the client prior to each episode of suction being carried out. If the client is unable to give consent verbally, other ways of obtaining it must be explored e.g. blinking, squeezing of the hand.

If the client is unable to give any form of consent and not carrying out suction would be detrimental to their health, it is acceptable to proceed, unless written documentation can be produced to the contrary.
The patient/client should be made aware that they have the right to withdraw their consent at any point during the treatment.

**Contraindications:** There are no absolute contraindications but potential precautions/dangers are listed below

**Reference material:** See attached reference list

**PRECAUTIONS**
- Facial fractures
- Loose teeth
- Clotting disorders
- Laryngeal / oral carcinoma
- Severe bronchospasm
- Stridor
- Restless / anxious client

**DANGERS**
- Do not attempt to remove a solid object or an inhaled foreign body from the back of the throat with suction. This could result in the object being forced further into the airway and possibly causing a complete obstruction

**EQUIPMENT**
- Suction machine
- Suction tubing
- Yankauer suction tubes
- Clean gloves (optional)
• Jug of cold tap water
• Cleaning products (according to manufacturers instructions)
• Bag for disposables
• Goggles and apron if splashing is likely

USE OF THE SUCTION MACHINE IN THE COMMUNITY SETTING

MEDEQUIP
The two models supplied by Medequip are:
• Laerdal LSU 78000003 (blue and yellow unit)
• DeVilbiss Vacuaide 7305 series (grey unit)

NOTTINGHAM REHABILITATION SERVICES
The only model supplied by Nottingham Rehabilitation Services is:
• DeVilbiss Vacuaide 7305 series (grey unit)

For correct use and maintenance of the available models highlighted above or any alternative models in circulation please refer to the individual manufacturer's instructions booklet

PROCEDURE

PREPARATION OF EQUIPMENT
• Decide on method of powering suction unit.
• Ensure that the unit is charged if using it via the battery
• Set to required pressure – normally up to 150mmHg (20Kpa)
PREPARATION OF CLIENT/PROCEDURE

- Explanation of procedure
- Obtain consent from the client
- Position client appropriately for procedure
- Check gag reflex
- Wash hands according to hand hygiene policy & procedure
- Switch on machine
- Check suction pressure by putting thumb over end of suction tubing
- Attach Yankauer to suction tubing
- Put on gloves (optional)
- Insert Yankauer gently into mouth until it reaches the pouch of the cheek, close over the hole on the Yankauer, then gently sweep over the arch of the tongue to the pouch of the opposite cheek.
- Only apply suction through the Yankauer for a short period of time (no longer than 10 seconds) as this might result in tissue grab causing damage to the sensitive lining of the mouth. Repeat again if necessary
- Administer oxygen pre and post procedure if indicated. This should be given at the prescribed flow rate for the individual
- Once the procedure has been completed, suction cold, clean water through the system.
- After flushing the unit and tubing through with clean water empty the collection bottle by disposing of the contents down a toilet or sluice
- Follow manufacturers instructions for cleaning equipment after use
- If cleaned Yankaeur is suitable for further use with the same client, within 24 hours, put back into plastic sheath to keep it clean
- Remove gloves (if worn) and wash hands

NB: Please check that suction machines have a copy of the manufacturers instructions included when received by the client
REPLACEMENT OF CONSUMABLES

• **Yankauer suction tubes** are marked as ‘single use’ indicating that they should be disposed of after a single procedure. They are not appropriate for multi patient use. Current practice in Derby City PCT is to change Yankauers every 24 hours or sooner if they cannot be cleaned effectively. They will need to be ordered through RDC on an ongoing basis via the patient’s GP surgery.

• Suction machines come with their own **suction tubing** which should be cleaned according to the manufacturers instructions. If unable to be adequately cleaned further supplies can be ordered from the appropriate equipment service via mail order.

• The **bacterial filter** on the Laerdal LSU model should be replaced monthly and the filter on the DeVilbiss model every two months. An adequate supply of filters should be ordered through the equipment service at the time of requisition. If extra filters are required due to discolouration/waterlogging they should be ordered via the equipment services via mail order.

ADMINISTRATION OF INVASIVE SUCTION IN THE COMMUNITY SETTING

**Nasopharyngeal / Oropharyngeal / Tracheostomy**

At the time or reviewing this guideline a request was made to all relevant staff groups in Derby City PCT to provide details of any ‘invasive’ suction procedures undertaken in the community setting within the last 2 years.

From the information collected it is not anticipated that invasive suction will be required on a frequent enough basis in the community setting to warrant reviewing the ‘invasive’ suction policy.

When invasive suction techniques are identified as a required care need, it is the responsibility of the community staff to seek instruction on an individual patient basis. Training/competency assessment should be accessed via the referrer from a person who uses invasive suction on a regular basis and is competent in it’s administration.
REFERENCES


DeVilbiss Vacu-Aide Portable Aspirator Instruction guide

DeVilbiss Suction Unit Instruction Guide 7305 Series


Laerdal Suction Unit – directions for use. Asmund S. laerdal. P.O. Box 377, N4001 Stavanger, Norway

LSU Laerdal Suction Unit – directions for use. Laerdal Medical Corporation. 167 Myers Corners Road, Wappingers Falls, NY 12590


Guideline updated June 2008 by Joanna Ruck & Amanda Moore, Adult Community Respiratory Physiotherapy, Derby City PCT

Review date: June 2010