

Summary Report for Individual Task
081-833-0170
Perform Endotracheal Suctioning
Status: Approved

DISTRIBUTION RESTRICTION: Approved for public release; distribution is unlimited.

DESTRUCTION NOTICE: None

Condition: You have a patient that requires endotracheal suctioning. You will need suction unit, suction catheter, sterile basin, sterile water, sterile gloves, or a disposable suction kit. You have performed a patient care hand-wash. You are not in a CBRN environment.

Standard: Perform endotracheal suctioning without violating aseptic technique or causing injury to the patient.

Special Condition: None

Special Standards: None

Special Equipment:

Safety Level: Low

MOPP:

Task Statements

Cue: None

DANGER
None

WARNING
None

CAUTION
None

Remarks: None

Notes: None

Performance Steps

1. Explain the procedure to the patient.
2. Position the patient in the semi-Fowler's position.
Note: In some cases, such as spinal injuries, the patient will have to remain in whatever position he is in at the time.

WARNING

If the suction pressure is too low, the secretions cannot be removed. If the pressure is too high, the mucous membranes may be forcefully pulled into the catheter opening.

3. Check the pressure on the suction apparatus.
Note: Ensure that the pressure reading is within the limits specified by local SOP and the recommendations of the equipment manufacturer.
4. Prepare the sterile materials. (See task 081-833-0007.)

CAUTION

Monitor the pulse oximeter reading during the entire procedure (see task 081-833-0164).

5. Pre-oxygenate the patient.
Note: The goal of pre-oxygenation is to maintain pulse oximetry (SPO₂) at or above 95%.
6. Put on sterile gloves. (See task 081-831-0008.)
7. Remove the catheter from the package using the dominant hand, keeping the catheter coiled to prevent contamination.
Note: This hand must remain sterile.

CAUTION

Do not touch the patient while measuring the length of the catheter. This will violate aseptic technique.

8. Measure the length of the suction catheter so that it will be approximately at the carina.
 - a. Tip of catheter to the ear.
 - b. From the ear to the nipple line.
9. Attach the tubing to the catheter with the non-dominant hand.
Note: This hand does not have to remain sterile.
10. Test the patency of the catheter.
 - a. Turn the suction unit on with the non-sterile hand.
 - b. Insert the catheter tip into the sterile saline solution using the sterile hand.

c. Place the non-sterile thumb over the suction port to create suction. Observe the saline entering the drainage bottle.

Note: If no saline enters the bottle, check the suction unit and/or replace the catheter and retest for patency.

11. Suction the patient.

a. Remove the oxygen delivery device with the nondominant hand.

b. Lubricate the catheter tip by dipping it into the saline solution.

c. Gently insert the catheter into the airway to the measured length without suctioning.

CAUTION

Do not suction any longer than 15 seconds.

d. Apply intermittent suction by placing and releasing the nondominant hand over the vent of the catheter while withdrawing the catheter.

e. Replace the oxygen delivery device and re-oxygenate the patient.

f. Repeat steps 10a through 10e as necessary, allowing time for re-oxygenation to take place between procedures.

WARNING

Discontinue suctioning immediately if changes in color or pulse rate occur.

12. Observe the patient for hypoxemia.

13. Disconnect the catheter and remove the gloves.

Note: Discard items IAW local SOP.

14. Make the patient comfortable.

15. Discard, or clean and store, used items IAW local SOP.

16. Record the procedure on the appropriate form.

a. Respirations (rate and breath sounds before and after suctioning).

b. Type, amount and color of secretions.

c. Patient's toleration of the procedure.

(Asterisks indicates a leader performance step.)

Evaluation Preparation: Setup: For training and evaluation, use a mannequin to be the simulated patient.

Brief Soldier: Tell the Soldier the simulated patient requires endotracheal suctioning. Have the testing Soldier verbalize

the steps while performing endotracheal suctioning.

PERFORMANCE MEASURES	GO	NO-GO	N/A
1. Explained the procedure to the patient.			
2. Positioned the patient in the semi-fowler's position.			
3. Checked the pressure on the suction apparatus.			
4. Prepared the sterile materials.			
5. Pre-oxygenated the patient.			
6. Put on sterile gloves.			
7. Removed the catheter from the package using the dominant hand, keeping the catheter coiled to prevent contamination.			
8. Measured the length of the suction catheter so that it will be approximately at the carina.			
9. Attached the tubing to the catheter with the non-dominant hand.			
10. Tested the patency of the catheter.			
11. Suctioned the patient.			
12. Observed the patient for hypoxemia.			
13. Disconnected the catheter and removed the gloves.			
14. Made the patient comfortable.			
15. Discarded, or cleaned and stored, used items IAW local SOP.			
16. Recorded the procedure on the appropriate form.			

Supporting Reference(s):

Step Number	Reference ID	Reference Name	Required	Primary
	0-323-06503-0	PHTLS Prehospital Trauma Life Support, Military 7th edition	Yes	No

Environment: Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT.

Safety: In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination.

Prerequisite Individual Tasks : None

Supporting Individual Tasks :

Task Number	Title	Proponent	Status
081-831-0008	Put on Sterile Gloves	081 - Medical (Individual)	Approved
081-833-0007	Establish a Sterile Field	081 - Medical (Individual)	Approved
081-833-0164	Measure a Patient's Pulse Oxygen Saturation	081 - Medical (Individual)	Approved

Supported Individual Tasks : None

Supported Collective Tasks :

Task Number	Title	Proponent	Status
08-1-0231	Provide Emergency Medical Services	08 - Medical (Collective)	Approved