

## Tracheostomy Tube Occlusion Risk Assessment Tool

Bradma label:

	1	2	3
<b>Reason for insertion</b>	Respiratory wean	Neurological problem	Upper airway obstruction
<b>Cuffed tube</b>	Uncuffed tube	Deflated cuff	Cuffed
<b>Secretions</b>	Suction required 4 hourly or more with clear secretions	Suction required every 2 hours with yellow/green thick secretions	Suction required hourly or more often with thick and/or blood stained/blood clots
<b>Respiratory/cardiovascular stability</b>	No evidence of desaturation or bradycardia	Transient desaturation that resolves after intervention	Sustained desaturation or evidence of bradycardia
<b>Communication</b>	Alert and able to summon assistance		Unable to summon assistance
<b>Humidification</b>	Swedish nose or trachphone	Cold water humidification and/or nebulisers	Hot water humidification and/or parvolex nebulisers
<b>Inner tube</b>	Permanent inner (Shiley®/Trachotwist®)	Temporary inner (Portex®)	No inner tube
<b>Patient dependency (with tube)</b>	Self caring	Self caring under supervision	Dependent

**Score 8 to 11** = at risk: follow CCOT management plan

**Score 12 to 16** = high risk: Follow CCOT management plan; continuous oxygen saturations; consider 1:6 nursing ratio throughout the 24 hour period

**Score 17 and above** = very high risk: Follow CCOT management plan; continuous oxygen saturations; complete risk assessment; consider 1:1 nursing ratio throughout the 24 hour period; consider transfer to a level 2 facility

**Document Individual Scores**

<b>Date</b>	<b>Reason for insertion</b>	<b>Cuffed tube</b>	<b>Secretions</b>	<b>Respiratory &amp;/or CVS stability</b>	<b>Communication</b>	<b>Humidification</b>	<b>Inner tube</b>	<b>Patient dependency</b>	<b>Total Score</b>

**Document actions in the patient’s healthcare record**