



How to suck out phlegm for the patient 如何為病人抽痰(英文)

Goals for eliminating sputamentum

1. Maintain respiratory tract unobstructed
2. Prevent foreign agent invasion
3. Assist patients to cough effectively
4. Refrain complications from happening

Method

1. Washes hands correctly.
2. Pump gauge cock open, adjust gauge to its suitable pressure (adult 120~150mmHg, babies and infants 60~100mmHg), prevent it from being over-pressurized, or cause mucous membrane damages.
3. Give patients one minute of oxygen to prevent hypoxemia before sucking thick phlegm.
4. Put on aseptic glove.
5. Apply aseptic techniques to take out phlegm tube and connect it to the phlegm system.
6. Procedures for sucking out phlegm: Trachea inner tubore or trchoestomy -> nasal -> oral.
7. To prevent mucous membrane from being injured and oxygen deficiency, do not press the top of the phlegm tube when it is inserted 12~15 centimeters inside of patients' nasal and mouth.
8. Compress the suction opening during suction; gently and rapidly suck out patients' phlegm in a vertical direction.
9. Each suction takes less than 15 seconds with 2~3 minutes interval between suction.
10. Stop suction immediately and provide patients with oxygen when there is abnormal color change of patients' skin.

11. After phlegm suction, give patients 100% oxygen for one minute to prevent hypoxemia.
12. Clean and rinse the tube wall to prevent bacteria from growing.
13. After phlegm suction, observe patient's breath, blood pressure, and palpitation.
14. Switches off phlegm gauge cock.
15. After the suction, dispose phlegm tube and glove inside-out within infectious and flammable garbage bags.
16. Wash hands precisely again.

若有任何疑問·請不吝與我們聯絡
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