Bivona Tracheostomy Tube

Made from opaque white silicone PVC. The silicone is reinforced with wire, producing a flexible tube that conforms to the shape of the trachea, and has a fixed flange which is kink resistant.

SPECIAL INSTRUCTIONS

Ferromagnetic coil precludes use during MRI, please change to a Shiley tube for scans.

Ideal for children requiring long-term ventilation.

Disconnection wedge must be used to facilitate separation from the tube.

Changed – Monthly or PRN

The latex free-hydrophobic tube hinders protein adhesion thereby limiting secretion build up and bacterial colonisation.

Tube can be sterilised in HSDU and re-used (5 times).

Ensure introducer kept with tube.

STOMA CARE

Daily/PRN tape changes must be carried out.

Use of cotton tapes and Trachi-Dress.

Correction tension – one finger space between tapes and child’s neck.

Emergency Box

Tube of the same size (Paed/Neo)
Tube ½ size smaller (Shiley)
Suction Catheter (same size as suctioning)
KY Jelly
Tracheostomy Tapes
Round Ended Scissors

Tube size .......... fg NEO/PAED (delete as appropriate)
Suction Length .......... cm Catheter Size ............ fg
Last Tube Change .../.../

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns.
Bivona Flextend
Tracheostomy Tube

Made from opaque white silicone PVC. The silicone is reinforced with wire, producing a flexible tube that conforms to the shape of the trachea, and has a fixed flange which is kink resistant.

SPECIAL INSTRUCTIONS

Ferromagnetic coil precludes use during MRI, please change to a Shiley tube for scans

Ideal for children requiring long-term ventilation

Disconnection wedge must be used to facilitate separation from the tube

Changed – Monthly or PRN

The latex free-hydrophobic tube hinders protein adhesion thereby limiting secretion build up and bacterial colonisation

Tube can be sterilised in HSDU and re-used (5 times)

Ensure introducer is kept with tube

STOMA CARE

Daily/PRN tape changes must be carried out.

Use of cotton tapes and Trachi-Dress

Correction tension – one finger space between tapes and child’s neck

Emergency Box

- Tube of the same size (Paed/Neo)
- Tube ½ size smaller (Shiley)
- Suction Catheter (same size as suctioning)
- KY Jelly
- Tracheostomy Tapes
- Round Ended Scissors

Tube size .......... fg  NEO/PAED (delete as appropriate)

Suction Length .......... cm  Catheter Size .......... fg

Last Tube Change …/…/…

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

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Shiley Uncuffed Tracheostomy Tube

Made from opaque thermo sensitive PVC with a thin walled shaft, tapered tip and universal 15mm termination

SPECIAL INSTRUCTIONS

This tube does NOT contain any metal and should be the tube used for MRI of the Head and Neck

Changed – PRN

Weekly Tube Changes

Shiley Tubes are not reusable and should NOT be sterilised and used again

STOMA CARE

Daily/PRN tape changes must be carried out.
Use of cotton tapes and Trachi-Dress
Correction tension – one finger space between tapes and child’s neck

Tube size .......... fg NEO/PAED (delete as appropriate)
Suction Length .......... cm Catheter Size ............ fg
Last Tube Change .../.../...

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

Emergency Box
Tube of the same size (Paed/Neo)
Tube one size smaller
Suction Catheter (same size as suctioning)
KY Jelly
Tracheostomy Tapes
Round Ended Scissors

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**SPECIAL INSTRUCTIONS**

Deflate 2 Hourly (minimise tracheal damage)

High Pressure Cuff
Only Inflated with Water

Inflate cuff to the desired amount, based on ventilation/ lower airway protection requirements.

Each child will require different amounts.

**Changed – Monthly or PRN**

The latex free-hydrophobic tube hinders protein adhesion thereby limiting secretion build up and bacterial colonisation

Tube can be sterilised in HSDU and re-used (5 times)

Ensure introducer is kept with tube

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**Clear Cuff**

Fill with sterile water

“A Glass of Water is Clear”

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**STOMA CARE**

Daily/PRN tape changes must be carried out.

Use of cotton tapes and Trachi-Dress

Correction tension – one finger space between tapes and child’s neck

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**Emergency Box**

*Tube Contains Metal*

Tube of the same size (Paed/Neo)
 Tube ½ size smaller (Shiley)
 Suction Catheter (same size as suctioning)
 KY Jelly
 Tracheostomy Tapes
 Round Ended Scissors
 TWO IV Syringes (one to remove tube, one to reinflate)
 Water for Injection Ampule

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**Tube size .......... fg NEO/PAED** (delete as appropriate)

**Suction Length .......... cm**  
**Catheter Size ............ fg**

**Last Tube Change .../.../...**

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Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

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Made from opaque white silicone PVC. The silicone is reinforced with wire, producing a flexible tube that conforms to the shape of the trachea, and has a fixed flange which is kink resistant. The cuff, when inflated, creates a seal between the tube and the trachea, protecting against aspiration and optimizing ventilation.

**SPECIAL INSTRUCTIONS**

4 hourly pressure checks with a manometer
- Only inflate with Air.

Inflate cuff to the desired amount, based on ventilation/ lower airway protection requirements.

Each child will require different amounts.

**Changed**
- Monthly or PRN

The latex free-hydrophobic tube hinders protein adhesion thereby limiting secretion build up and bacterial colonisation.

Ensure introducer is kept with tube

**BLUE CUFF**

Fill with Air

“The Sky is Blue”

**STOMA CARE**

Daily/PRN tape changes must be carried out.

Use of cotton tapes and Trachi-Dress

Correction tension – one finger space between tapes and child’s neck

**Emergency Box**

- Tube of the same size (Paed/Neo)
- Tube ½ size smaller (Shiley)
- Suction Catheter (same size as suctioning)
- KY Jelly
- Tracheostomy Tapes
- Round Ended Scissors
- TWO IV Syringes
- Water for Injection Ampule

**Tube size …….. fg NEO/PAED** (delete as appropriate)

**Suction Length …….. cm** 

**Catheter Size ………… fg**

**Last Tube Change …/…/…**

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

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**SPECIAL INSTRUCTIONS**

3-Way Tap Readily Available
Self-Inflating Cuff

**IMPORTANT**
The cuff is self-inflating, to remove or insert the tube; the cuff must be deflated and ‘held’ by turning off the three-way tap. DO NOT attempt to remove or insert the tube without deflating and turning off the tap.

**Changed**
– Monthly or PRN
The latex free-hydrophobic tube hinders protein adhesion thereby limiting secretion build up and bacterial colonisation
Tube can be sterilised in HSDU and re-used (5 times) Ensure introducer is kept with tube
Contact NP/ENT if the port is cut

**RED CUFF**

Danger
“Care for this tube with Caution”

**STOMA CARE**
Daily/PRN tape changes must be carried out.
Use of cotton tapes and Trachi-Dress
Correction tension – one finger space between tapes and child’s neck

**Tube size .......... fg NEO/PAED** (delete as appropriate)

**Suction Length .......... cm**

**Catheter Size .......... fg**

**Last Tube Change .../.../...**

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

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**Emergency Box**
Tube of the same size (Paed/Neo)
Tube ½ size smaller (Shiley)
Suction Catheter (same size as suctioning)
KY Jelly
Tracheostomy Tapes
Round Ended Scissors
TWO IV Syringes
A Three-Way Tap
Spare Fome Tube – Same Size (Paed/Neo- is available) – Not in box – for Elective Changes

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Bivona Hyperflex Tracheostomy Tube

Made from opaque white silicone PVC. The silicone is reinforced with wire, producing a flexible tube that conforms to the shape of the trachea, and has a fixed flange which is kink resistant.

SPECIAL INSTRUCTIONS
Ferromagnetic coil precludes use during MRI

ADJUSTABLE FLANGE
PERMITTING ALTERATION OF TUBE LENGTH

UNSAFE holding clip, therefore check the length does not alter (not for home use). Not recommended for longterm use. Must customise a fixed flange tube ASAP using customisation sheet.

Changed
– Monthly or PRN
The latex free-hydrophobic tube hinders protein adhesion thereby limiting secretion build up and bacterial colonisation
Tube can be sterilised in HSDU and re-used (5 times)
Ensure introducer is kept with the tube

STOMA CARE
Daily/PRN tape changes must be carried out.
Use of cotton tapes and Trachi-Dress
Correction tension – one finger space between tapes and child’s neck

Emergency Box
Tube of the same size (Paed/Neo)
Tube ½ size smaller (Shiley)
Suction Catheter
(same size as suctioning)
KY Jelly
Tracheostomy Tapes
Round Ended Scissors
Depends on length - may keep a spare standard Bivona tube available ask NP/ENT

Tube size ........... fg  NEO/PAED (delete as appropriate)
Suction Length ........ cm  Catheter Size ............ fg
Last Tube Change …/…/…

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

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SPECIAL INSTRUCTIONS

Ensure the correct portex adaptor is available for the Ambu Bag

The anterior limb can be occluded/left open. Be familiar with resuscitation techniques – refer to CPC guidelines

DO NOT REMOVE the T Tube unless in an emergency – replace with a tracheostomy tube

Ensure that the ring is on the anterior limb AT ALL TIMES - this prevents the tube from falling into the stoma

Changed – PRN

Can be left in situ for months at a time and the tube is only changed under General Anaesthetic

STOMA CARE

Daily Clean

Slip the ring forward and clean and dry all around the T Tube.

Replace the ring so it is pressed up against the skin

Tube size .......... fg NEO/PAED (delete as appropriate)

Suction length upper limb (to include anterior limb) .......... fg

Suction length lower limb (to include anterior limb) .......... fg

Catheter size .......... fg

Contact Jo Cooke ANP bleep 0712 or ENT On Call bleep 1020 if you have any concerns

Emergency Box

Tube of the same size – refer to sizing chart to get equivalent size and convert Fg to mm (Paed/Neo -)

Tube ½ size smaller

Suction Catheter (same size as suctioning)

KY Jelly

Tracheostomy Tapes

Round Ended Scissors

Male to Female adaptor – must fit snugly into T Tube

Blue clamps

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