

**PARKLAND HEALTH & HOSPITAL SYSTEM  
LEADERSHIP & ORGANIZATIONAL DEVELOPMENT**

**COMPETENCY VALIDATION  
TRACHEOSTOMY CARE**

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Unit: \_\_\_\_\_ Date: \_\_\_\_\_

Tracheostomy Care	1 <sup>st</sup> Attempt (P or F)	2 <sup>nd</sup> Attempt (P or F)	Comments
1. States patient has extra cuffed trach and inner cannula in bag at head of bed.			
2. States obturator in separate bag at head of bed.			
3. States need for functional suction setup and sterile 14Fr catheters in room at all times.			
4. Collect supplies: sterile gloves, normal saline, gauze, trach ties, disposable inner cannula, drainage sponge.			
5. States that inner cannula must be changed every 24 hours.			
6. Verify patient using two patient identifiers.			
7. Explain procedure to patient.			
8. Wash hands.			
9. Open inner cannula; keeping sterile.			
10. Don sterile gloves.			
11. Use one hand to remove old inner cannula and discard, keep other hand sterile.			
12. Using sterile hand insert new inner cannula and clip in place, reconnect oxygen.			
13. Clean trach site using gauze and normal saline to remove all secretions.			
14. Change trach ties if soiled.			
15. States cuff always deflated unless patient gets IPPB or on ventilator.			
16. States if patient has nausea/vomiting while cuff deflated, immediately inflate cuff and call physician.			

**The completion of this form validates the above nurse's competency for this skill.**

#1 Pass / Fail Competency Validator Signature: \_\_\_\_\_

#2 Pass / Fail Competency Validator Signature: \_\_\_\_\_