

## B-191 R Heat Moisture Exchange Device-Nose

**Purpose:** To provide humidity to the airway as an artificial airway (tracheostomy) bypasses the body's natural humidification process.

### Applies To

Registered Nurses  
Licensed Practical Nurses

### Equipment/Supplies

- HME, Heat Moisture Exchange Device or Thermovent

### Procedure

1. Wash hands and dry. Refer to the Hand Washing procedure. Don clean gloves.
2. Remove humidification via condenser device or disconnect cascade from vent and keep cascade clean by reattaching to cascade unit to form a circle that protects cascade circuit from air.
3. Perform endotracheal suctioning as needed per breath sounds, oxygen saturations and client request.
4. Perform stoma care as needed and change inner cannula as appropriate.
5. Securely apply HME to circuit for ventilator client or thermovent to tracheostomy patient per manufacturer suggestions client.
6. Change device for copious secretions or soiling.
7. Call RN to report any change in color, amount or consistency of secretions.

### Documentation guidelines

Document in the clinical record:

1. Type of device client using for humidification.
2. Character and amount of secretions.

### Nursing Considerations

- Use a continuous pulse oximetry or do spot checks per plan of care if pulse oximetry is ordered for client.
- Quickly respond to coughing, gagging or decreased oxygen saturations.

**Pediatric Considerations**

- Teach babies and children to avoid pulling off or tugging at device.
- May need to distract infants and children until they become used to device.
- Infants and children may need their device changed more frequently than adults.
- Call RN immediately for any changes in secretions.
- Suction and place thermovent before feeding infant or child.

**Related Procedures**

Tracheal Care Suctioning, humidification via cascade or condenser and pulse oximetry monitoring.

**Policy History**

Approval Date	01/17/2010
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