

B-210 R Oral Pharyngeal Suctioning

Purpose

Maintain upper airway patency.

Facilitate air exchange by removing or mobilizing oral secretions

Decrease mouth odors and anorexia.

Applies To

Registered Nurses

Licensed Practical/Vocational Nurses

Other (*Identify*): _____

Equipment/Supplies

- Suction machine and connector tubing.
- Two pairs of disposable gloves.
- Suction catheter (size 12-16 Fr. for adults; 6-12 Fr. for infants/children).
- Tap water (approximately 100 ml).
- Water soluble lubricant.
- Clean basin.
- Oxygen, if needed by client.

Procedure

1. Wash hands. Refer to the Hand Washing procedure.
2. Assist the client into a semi-Fowler's position, if appropriate. *This facilitates suctioning and provides for maximum chest expansion.*
3. Bulb syringe may be used to remove oral secretions rather than suction catheter. Prepare catheter and supplies. Fill basin with water.
4. Don gloves.
5. Turn on suction machine. Set vacuum regulator to appropriate negative pressure if machine is variable. *Elevated pressure settings increase the risk of trauma to the oral mucosa.*
6. Insert the catheter into the mouth alongside of the tongue and slide down to pharynx (approximately 13 cm in adults). *This stimulates coughing and removes secretions.*
7. Apply suction for no more than 15 seconds. Withdraw catheter gently, rotating it back and forth between thumb and index finger. *Intermittent suction minimizes hypoxia and mucosal damage.*

8. Place catheter tip in basin. Apply suction until connecting tubing is clear.
9. Allow time for a rest period and repeat the procedure until the airway is cleared. Limit total suction time to three to five minutes. *This allows the client to rest and provides for reoxygenation. When secretions are removed,*
10. Empty suction contents into the toilet. Clean the suction bottle at least each shift and PRN.
11. Remove gloves and discard equipment according to the Agency Waste Disposal Policy.
12. Wash hands. Refer to the Hand Washing procedure.

Documentation Guidelines

Document in the clinical record:

1. The return to baseline.
2. Odor, color, consistency of secretions.
3. Frequency of suctioning.

Related Procedures

None

Policy History

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Approved by	Mike Carpenter
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