



Tracheal suctioning, intubated patient checklist Procedure

Student name: Date: Score: /5	Hospital unit: Clinical Instructor name:
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- ☐ Verify the practitioner's order.
- ☐ Gather and prepare the equipment and supplies.
- ☐ Perform hand hygiene.
- ☐ Confirm the patient's identity.
- ☐ Provide privacy.
- ☐ Assess the patient's baseline status, including the oxygen saturation level.
- ☐ Unless contraindicated, maintain the head of the bed at a 30- to 45-degree angle..
- ☐ Open the sterile normal saline solution or sterile water bottle.
- ☐ Open the package containing the disposable sterile solution container.
- ☐ Open the suction catheter kit using sterile, no-touch technique, and put on the sterile glove and the clean glove.
- ☐ Using your nondominant (nonsterile) hand, pour the sterile normal saline solution or sterile water into the disposable sterile solution container.
- ☐ Remove the suction catheter from its wrapper using your dominant (sterile) hand.
- ☐ Using your nondominant (nonsterile) hand to manipulate the connecting tubing, attach the suction catheter to the tubing.
- ☐ Set the suction pressure using your nondominant (nonsterile) hand.
- ☐ Hyperoxygenate the patient.
- ☐ Using your nondominant (nonsterile) hand, disconnect the patient from the ventilator.
- ☐ Advance the suction catheter to the premeasured distance without applying suction.
- ☐ Apply suction intermittently while withdrawing the suction catheter using a rotating motion.
- ☐ Stabilize the endotracheal tube while withdrawing the suction catheter. Suction for no more than 15 seconds.
- ☐ Resume oxygen delivery and hyperoxygenate the patient before continuing tracheal suctioning.
- ☐ Observe and allow the patient to rest for a few minutes before the next tracheal suctioning.
- ☐ Observe the secretions. Clear the suction catheter by dipping the tip into the sterile normal saline solution or sterile water and applying suction.
- ☐ Assess the patient's need for upper airway suctioning.
- ☐ Clear the connecting tubing by aspirating the remaining sterile normal saline solution or sterile water.
- ☐ Remove and discard your gloves and, if worn, other personal protective equipment.

- ☐ Discard used supplies appropriately.
- ☐ Perform hand hygiene.
- ☐ Unless contraindicated, maintain the head of the bed at a 30- to 45-degree angle.
- ☐ Obtain the patient's vital **signs**, monitor the oxygen saturation level, and auscultate breath sounds bilaterally.
- ☐ Perform hand hygiene.
- ☐ Document the procedure.