


NASOPHARYNGEAL WASH: VACUUM: ASSISTED ASPIRATE METHOD











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Introduction














Nasopharyngeal suctioning is a viable alternative for people who are obtunded or whose cough is weak.



Procedure

1. Assemble the following equipment:






-  Suction pump with adjustable pressure regulator (wall or portable)
-  Sterile suction catheter of appropriate size – use the smallest size catheter to be effective, ideally 10-12 FG when possible
-  Sterile water-soluble lubricant
-  Sterile gloves
-  Apron
-  Sterile disposable co-polymer examination gloves
-  Eye protection e.g. Goggles or visor
-  Sterile Sputum trap if specimen required
-  Viral transport medium (if required by laboratory)
-  Ensure emergency equipment available if required

2. The Procedure

-  Assess the requirements for suctioning. Abnormal breathing, physiological deterioration and / or distress, audible secretions in upper airway or noisy crackles on auscultation, coughing, desaturation or raised respiratory rate
-  Ensure a clear explanation of the procedure is given to enable informed consent. If the individual lacks capacity to consent follow consent to examination procedure
-  Prepare the individual by offering reassurance and information, treating them with dignity, respect and, maintain privacy Give analgesia as prescribed
-  Position the individual upright in a chair or as upright as possible in bed supported by pillows.
-  Put on apron and wash hands. Use eye protection/mask if indicated to minimise cross infection. The use of eye protection and a mask is recommended if the individual has such infections as TB, meningococcal meningitis or any blood or air borne virus. For further advice, contact the Infection Control team.
-  Attach suction tubing to the male adaptor of the specimen trap and attach rubber tubing on the trap to the end of the suction catheter, leaving the package on,
-  Turn suction on and adjust to the required level to ensure the suction level is high enough to remove the secretions but not cause trauma.
-  Put on the sterile gloves and remove suction catheter from the packaging aseptically
-  Ask the individual to tilt their head backwards slightly whilst sitting upright
-  Dip the end of the catheter into the water-soluble lubricant to minimise discomfort and prevent damage.
-  Without applying suction carefully insert the catheter into the nostril and direct posteriorly towards the external ear.
-  Apply suction using a rotating movement, slowly removing the catheter. The catheter should remain in the nasopharynx no longer than 10 seconds.
-  Hold the trap upright to prevent secretions being suctioned into suction pump

-  Rise the catheter if necessary with approximately 10-20mls of viral transport medium.
-  Disconnect suction. Depending on the type of suction trap connect tubing to arm of sputum trap to seal or detach and apply sealable lid.

3. Post procedure

-  Dispose of all waste, remove apron and gloves etc and wash your hands
-  Label the sample and complete all documentation as required for the sample
-  Dispatch as soon as possible
-  Document in care plan
-  Leave the individual as comfortable as possible

Further Guidance

NICE guidelines [CG139] Published date: March 2012- Infection: Prevention and control of healthcare-associated infections in primary and community care
NICE quality standard [QS61] Published date: April 2014 - Infection prevention control