 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-I-29-P01-S03
	Effective Date:	10-30-2021
	Document Type:	Standard Operating Procedure
	Page Number:	1 of 4
	Department/Section:	Neonatal Intensive Care Unit
	Document Title:	<b>ASSISTING IN SUCTIONING OF NEWBORN ON ARTIFICIAL VENTILATION</b>

**PURPOSE:**


To institute procedures of suctioning newborn on artificial ventilation.

**SCOPE:**

Applies to all Neonatal Intensive Care Unit Staffs of Dr. Pablo O. Torre Memorial Hospital


**PERSON RESPONSIBLE:**

Physicians, Staff Nurses

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### **PROCEDURE:**

1. The Nurse performs hand washing.
2. The Nurse assembles all the suction equipment needed:
  - 2.1 clean gloves
  - 2.2 suction catheter (fr. 5 40 cm or fr. 8 40 cm)
  - 2.3 suction connecting tube (fr 24/25)
  - 2.4 rinsing solution (NSS for irrigation)
  - 2.5 sterile bottles with cover
3. The Nurse attaches one end of the suction connecting tube to the suction machine and the other end to the connecting port of the suction catheter. Note: Do not contaminate the suction catheter by exposing the entire tube.
4. The Nurse pours the necessary amount of rinsing solution into 2 sterile bottles.
5. The Nurse turns on suction apparatus.
6. The Nurse dons gloves or prepare sterile forceps (depends on physician's preference)
7. The Nurse designates a dominant hand and a non-dominant hand. Use the dominant hand to maneuver the sterile area of the suction catheter and the non-dominant hand to hold the end of the suction connecting tube where the connecting port of the suction catheter is attached.
8. The Nurse moistens the suction catheter tip with the prepared rinsing solution in the suction bottle for endotracheal tube.
9. The carefully detaches the extender from the tip of the extension tube. Advance the suction catheter into the lumen and when resistance is felt, withdraw about 1 centimeter of the catheter.
10. The Nurse gently but quickly suctions the secretions in a rotating motion while pulling the catheter out form the endotracheal tube.
11. The Nurse rinses the suction catheter and repeat suctioning as necessary until the airway is clear of secretions.
12. A new catheter may be used to suction the oropharyngeal airway.
13. The Nurse places the suction connecting tubing in a sterile plastic and seal with


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

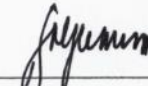
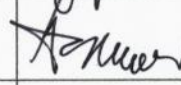
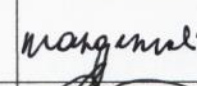

14. The Nurse discards used catheters and gloves properly after the procedure.
15. The Nurse turns off the suction machine.
16. The Nurse assesses effectiveness of suctioning by auscultating the lung fields. Note breath sounds and compare assessment before and after the procedure.
17. The Nurse performs after care and perform hand hygiene.

#### **REFERENCES:**

The Royal Children's Hospital Melbourne. (n.d.-a). *Clinical Guidelines (Nursing) : Endotracheal tube suction of ventilated neonates*. Retrieved October 5, 2021, from [http://www.rch.org.au/rchcpg/hospital\\_clinical\\_guideline\\_index/Endotracheal\\_tube\\_suction\\_of\\_ventilated\\_neonates/](http://www.rch.org.au/rchcpg/hospital_clinical_guideline_index/Endotracheal_tube_suction_of_ventilated_neonates/)

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