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Tracheostomy Tube Exchanger

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Tracheostomy Tube Exchanger

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My opinion

Cuffless tracheostomy tube in-situ may present challenges when presenting for elective or emergent surgery under deep sedation to general anesthesia with patient's inability to spontaneously protect airway or under minimal sedation to moderate sedation with patient's presumed ability to spontaneously protect airway [1]. Despite preemptively replacing cuffless tracheostomy tube with cuffed tracheostomy tube, cuffed tracheostomy tube as similar to cuffed endotracheal tube will not prevent tracheobronchial aspiration of subglottic secretions accumulated above inflated cuff unless they are suctioned before deflating the inflated cuff or specialized cuffed tracheostomy tube is left in-situ allowing continuous or intermitted suction of subglottic secretions above the cuff [2]. However, volume of these subglottic secretions may be lower with endotracheal tube than with tracheostomy tube unless cuffed endotracheal tube tip has been positioned as distally inside trachea as cuffed tracheostomy tube tip. Now questions arise when concerned about losing airway while exchanging tracheostomy tube especially if tracheal stoma is immature. Herein, airway exchange catheter comes in handy [3-5], which may be routinely used even if an experienced otorhinolaryngologist may be available because maturation of tracheal stoma may be variable and unpredictable if tracheostomy tube exchange is happening within the first 30 days of its surgical or percutaneous placement. Moreover, real-time capnography can be used to confirm intra-tracheal position of airway exchange catheter before removing old tracheostomy tube as well as intra-tracheal position of new tracheostomy tube before removing airway exchange catheter. Bronchoscope swivel adapter comes in handy here [6], which allows almost-closed breathing system to acquire real-time capnography from airway exchange catheter while old tracheostomy tube is still in-situ as well as from new tracheostomy tube while airway exchange catheter is still in-situ. Therefore, bronchoscope swivel adapter supporting real-time capnography enhances patient safety during tracheostomy tube exchange with airway exchange catheter by anesthesiologists who may not be as experienced as otorhinolaryngologists who are routinely exchanging tracheostomy tube without airway exchange catheter, bronchoscope swivel

adapter or real-time capnography. Â Â Â Â

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