Laryngectomy Suctioning

Laryngectomy suctioning removes secretions and mucus from your airway through your laryngectomy stoma. You may need to suction if your secretions or mucus are thick and too hard for you to cough out.

Supplies

- Suction machine
- Suction catheter kit
- Small bowl
- Mirror
- Flashlight
- Cotton swabs (Q-tips)
- Water

Steps on How to Suction

1. Organize your supplies.
2. Wash your hands with soap and warm water.
3. Pour about ½ cup of water into a bowl.
4. Connect the suction catheter to the suction machine and tubing.

This handout is for informational purposes only. Talk with your doctor or health care team if you have any questions about your care.

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5. Turn on the suction machine. Check the suction by dipping the catheter tip into the bowl of water. Cover the thumb hole on the catheter to apply suction and then release.

6. Take several deep breaths then cough forcefully.

7. Gently place the catheter into your stoma about 3 to 3 ½ inches while you breathe in. **Do not cover the thumb hole on the catheter when you put the catheter in your stoma.**

8. When the catheter is in place, cover the thumb hole on the catheter and start to suction.

9. As you slowly pull the catheter out, roll the catheter between your thumb and forefinger and move your thumb on and off the thumb hole. This is called intermittent suction. **Do not completely cover the thumb hole when you pull out the catheter.**

10. **Do not suction for longer than 10 to 15 seconds.**

11. Relax and take several deep breaths in between each time you suction.

12. Repeat steps 6 to 11, 1 to 2 times until your airway is clear.

13. Use a flashlight and mirror to look into your stoma for dried mucus plugs. A flashlight with a focused beam works well.

14. Use cotton swabs to remove thick mucus plugs near your stoma opening.

15. After you suction, rinse and clean your catheter and the tubing connected to the suction machine. Wash your hands.

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Look at the amount, color and thickness of your secretions. Call your doctor if you see any of the following:

- Bright red blood
- Yellow, brown or green drainage
- Drainage that smells bad
- Secretions are thicker than usual
- Increase in the amount of secretions