The Passy-Muir® Tracheostomy Speaking Valve allows the patient with a tracheostomy to speak. It is a one-way valve that connects to the tracheostomy tube. The valve opens during inhalation to allow air to go into the lungs. The valve closes during exhalation and forces air up through the vocal cords to create speech.

**Advantages of the speaking valve**

- Improves speech clarity and volume of voice
- Improves swallowing by helping to regulate pressure in the lungs
- Decreases secretions – requires less suctioning
- Improves smell
- Increases appetite
- Improves quality of life
- Directs air flow through the mouth and nose – it allows you to blow your nose and cough up secretions
- Can be used with oxygen, humidity and ventilators
How to use the speaking valve

Non-Ventilator Patients

• Clear tracheal and oral secretions by suctioning or by coughing.
• Completely deflate the cuff of the tracheostomy tube. **If the cuff is not fully deflated, you will not be able to breathe.**
• If necessary, remove the oxygen or humidity.
• Attach the valve to the tracheostomy tube and twist ¼ turn to the right.
• If necessary, replace the oxygen or humidity.
• To remove the valve, twist the valve off gently to the left, while holding the trach plate.
• It often takes time to build up a tolerance to the valve. Be patient.

Ventilator Dependent Patients

• Clear tracheal and oral secretions by suctioning or by coughing.
• Completely deflate the cuff of the tracheostomy tube.
• Place the valve in-line to the ventilator tubing in the following manner: ____________________________

________________________________________________________________________

________________________________________________________________________

• If necessary, adjust the ventilator settings:
  \[ \text{FiO}_2 \quad \text{Tidal Volume} \quad \text{Other} \]

• To remove the valve, take the valve out of the ventilator circuit.
• If necessary, return ventilator settings:
  \[ \text{FiO}_2 \quad \text{Tidal Volume} \quad \text{Other} \]

• If necessary, inflate the cuff again.

Special considerations

• The valve comes in 2 different colors: purple and aqua. Your healthcare team will decide on the best version for you.
• The smaller the tracheostomy tube is, the better the valve can produce your voice.
• Remove the valve during aerosol treatments.
• Do not sleep with the valve in place.
• The valve may occasionally pop off due to loose fit or a strong cough. Just replace it and be sure connections are tight.
• If the plastic film on the valve weakens, you may make a “honking” or vibrating sound. Replace the valve if this occurs.
Cleaning

- Clean daily with soapy water. Ivory soap or other mild soaps are recommended.
- Rinse thoroughly with warm water.
- Allow to air dry.
- Soak the valve in a germicide solution 1 to 2 times per week. Solution ________________.
- Do not use the following items for cleaning because they can damage the valve:
  ‣ Hot water
  ‣ Harsh chemicals
  ‣ Peroxide, bleach, vinegar or alcohol
  ‣ Any brushes

When to get a new valve

The valve should be replaced after 2 months of use or if it becomes sticky, noisy or begins to vibrate.

Talk to your doctor, speech language pathologist (SLP) or respiratory therapist if you have questions about your valve’s care.