

Patient briefing



Information

7 March 2005

Understanding NPSA advice

This is a summary of
the information
issued to the NHS

Improving emergency care for patients who breathe through their neck

What is a tracheostomy or a laryngectomy?

Some patients cannot breathe through their windpipe properly and so they have an operation to create an opening or stoma in the front of their neck to breathe through. This opening is called a tracheostomy.

A tracheostomy is also made after a patient's voice-box or larynx is removed during surgery called a laryngectomy.

The term used by a support group, the National Association of Laryngectomee Clubs (NALC), for patients who have had a laryngectomy or have a long term tracheostomy is neck breathers.

What is the patient safety risk to patients who has had a laryngectomy or tracheostomy?

Not all healthcare staff are aware of how to deal with the special breathing needs of these patients. When giving emergency care, doing the right thing quickly is essential. If an unconscious patient has been rushed into an accident and emergency (A&E) department, healthcare staff may not check whether a patient has a stoma or if they do, they may still not know how best to treat them. This is when there may be a risk of something going wrong.

What research has the NPSA carried out?

The NPSA carried out a survey¹ of NALC members. The results showed that there have been rare occasions when neck breathers, have accidentally been given oxygen through the nose and mouth. This doesn't work for these patients as the oxygen does not reach their lungs properly and their life can be put at risk. Sometimes oxygen was given the right way (via the stoma), but blockages (mucous plugs) in the airway were not removed first. This also stops the right amount of oxygen getting to the patient's lungs.

How do these mistakes happen?

The NPSA has found that the training of some ambulance or hospital staff was part of the problem. These healthcare staff should have more training on how to best give oxygen to this group of patients and on how to unblock the stoma, if necessary.



What is the NPSA doing about this problem?

The NPSA is sending patient safety information to NHS organisations including A&E departments and ambulance trusts explaining what the problem is and what they can do to protect patients including:

- suggesting that hospitals give staff more information about how to care for neck breathers in an emergency situation;
- to make sure that relevant training courses include information on how to care for neck breathers for ambulance and hospital staff working in A&E or other areas who are likely to be involved in their emergency care;
- advising that ambulances and equipment trolleys, used in the during the emergency care of patients, have the right equipment to best treat neck breathers;
- helping promote the work of the NALC to raise awareness of neck breathers' needs. NALC volunteers are also available to visit and demonstrate neck breathers' requirements to NHS organisations.

Other work

As a result of the work of the NPSA, advice on the airway management of laryngectomy and tracheostomy patients has been included in Version 3 of the Joint Royal College Ambulance Liaison Committee (JRCALC) Clinical Practice Guidelines.

Reference

- 1 National Patient Safety Agency (2004). *Laryngectomy Patients and Emergency Care*. Available at www.npsa.nhs.uk/advice (November 2004)

More information and contact details

The full patient safety information notice and the results of the survey of NALC members are available from the NPSA website: www.npsa.nhs.uk/advice

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The National Patient Safety Agency (NPSA) was established in July 2001 to improve the safety of NHS patients by promoting a culture of reporting and learning from patient safety problems.