The Impact of Specialized Tracheostomy Care Team

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Background: Tracheostomy care begins in the intensive care unit (ICU) and after stabilization, the patient is transferred to a general ward, decannulated or discharged. Insufficient experience of staff caring for tracheostomy patients may lead to suboptimal care and increased morbidity.

Objective: To assess the impact of a specialized multidisciplinary tracheostomy team on tracheostomy care.

Design: A Retrospective Cohort Study.

Setting: ENT Department, Salmaniya Medical Complex, Bahrain.

Method: The data was collected from the ICU and medical wards from January 2009 to December 2014. Criteria assessed were tracheostomy tube used, decannulation time and incidence of tracheostomy-related complications.

Result: Six hundred forty-four patients post-tracheostomy were reviewed. One hundred twentynine (20%) patients were decannulated between one month to 3 years; 28 (4.3%) patients had complications. No death was recorded due to tracheostomy-related complications.

Conclusion: There was a significant reduction in tracheostomy complications due to specialized tracheostomy team. The decannulation time was successfully reduced and an increased number of decannulated patients.

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