

STRAPPING OF NASAL ENDOTRACHEAL TUBE

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INTRODUCTION

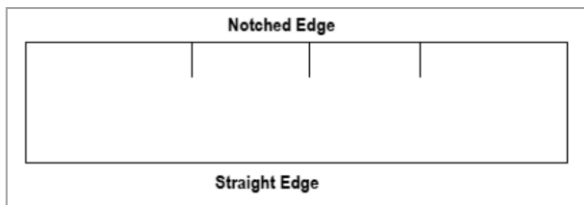
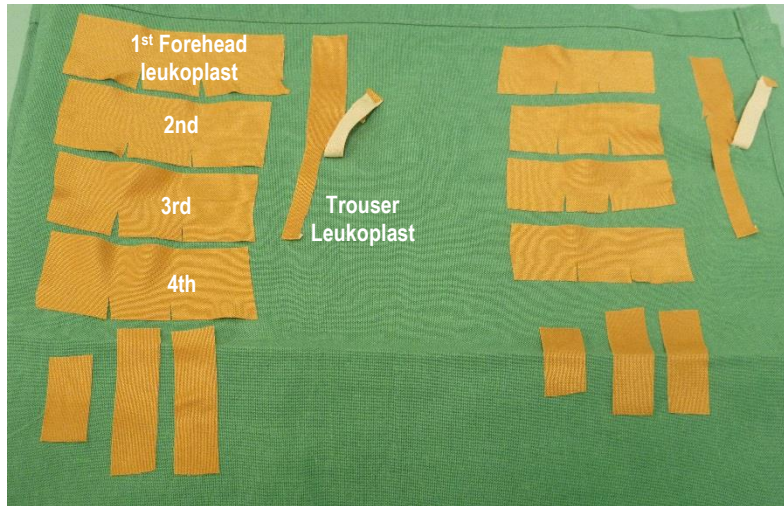
Some sick newborns in NCC require respiratory support. A nasal endotracheal tube or an oral endotracheal tube is inserted into the trachea to ventilate these newborns. The ETTs are required to be secured safely.

1. **AIM**
To secure the nasotracheal tube (ETT) safely and securely.
2. **PATIENT**
Newborns
3. **STAFF**
Medical and nursing staff
4. **EQUIPMENT**

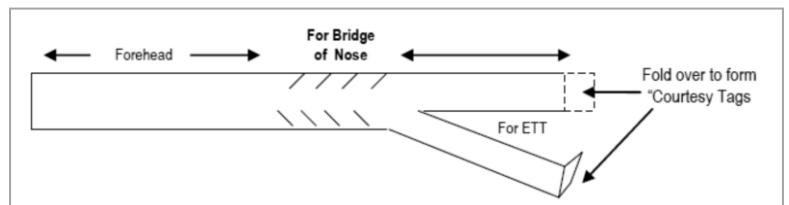
For nasal ETT strapping

For infants > 32 weeks gestation > 1500g	For infants < 32 weeks gestation < 1500g
Forehead Leukoplast x 4: (Picture 1)	Forehead Leukoplast x 4: (Picture 1)
Approx. 2.5cm width	Approx. 2cm. width
Trouser Leukoplast x 1: (Picture 2)	Trouser Leukoplast x 1: (Picture 2)
Approx. 9cm long of 1.2cm width	Approx. 7cm long of 1.2cm width
Short Leukoplast: x 3 (Picture 3)	Short Leukoplast: x 3 (Picture 3)
Approx. 2cm long of 1.2cm width	Approx. 3-4cm long of 1.2cm width
Cotton Tapes: Approx. 40cm of 0.7cm cotton tape AND Approx. 40cm of 1.2cm cotton tape	
Barrier Film sachet	
Neopuff	
Resuscitation Trolley	
Suction	

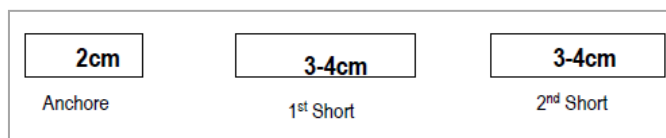
STRAPPING OF NASAL ENDOTRACHEAL TUBE cont'd



Forehead Leukoplast - Picture 1



Trouser Leukoplast - Picture 2



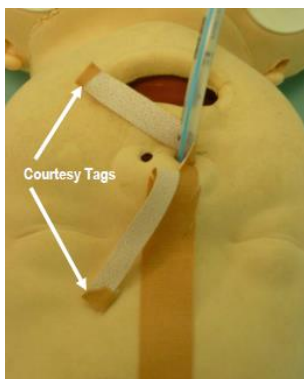
Short Leukoplast - Picture 3

5. CLINICAL PRACTICE

1. Inform medical team if any ETT is being strapped and to be available in the clinical area.
2. Ensure that chest xray has confirmed ETT position if it is a new ETT inserted. Ensure medical team has verified xray.
3. Ensure Neopuff is available and ready for an emergency situation.
4. Cut leukoplasts as per Pictures 1, 2 and 3. Provide a "courtesy" fold at the end-point of the trouser legs.
5. Seek assistance from second RN to hold ETT.
6. Apply Barrier Film to forehead, bridge of nose downward toward nares. **AVOID EXCESS TRICKLING INTO EYES.**

STRAPPING OF NASAL ENDOTRACHEAL TUBE cont'd

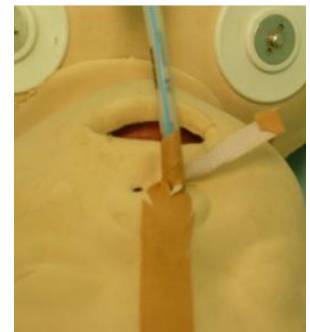
7. Apply *Trouser Leukoplast* along bridge of nose and onto nose (follow the curve of the bridge) first and then onto forehead. Ensure that the Y-junction of the *Trouser Leukoplast* is at the tip of the nose that meets the ETT. (Picture 4)
8. Wrap one leg of the *Trouser Leukoplast* around the ETT first, then in a spiral fashion from outer side of ETT inward (Picture 5) to cover at least 1cm of ETT.
9. Apply the other leg of the *Trouser Leukoplast* in a spiral fashion in the opposite direction to the previous action. (Picture 6)



Picture 4

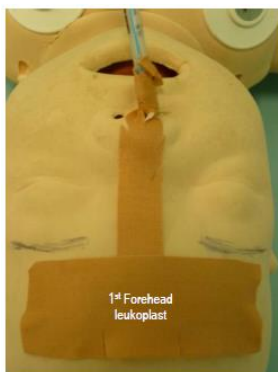


Picture 5

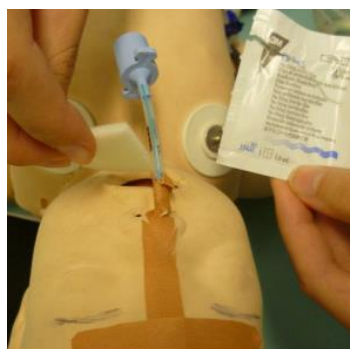


Picture 6

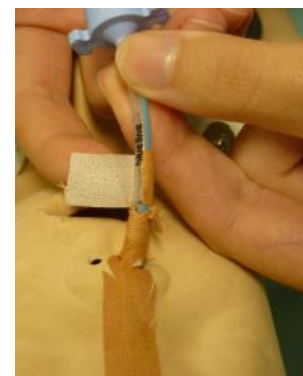
NOTE: DO NOT APPLY LEUKOPLAST TO ANY PART OF THE EYEBROW.



Picture 7



Picture 8



Picture 9

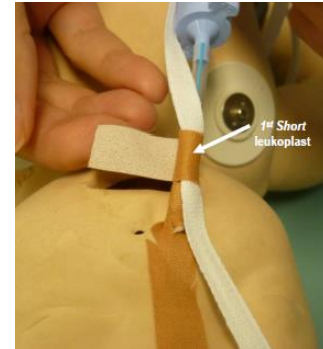
10. Apply Forehead Leukoplast to forehead. Ensure the straight edge of the leukoplast is above the eyebrow. (Picture 7).
11. Apply Barrier Film to ETT and allow to dry. (Picture 8)
12. Fold 1st cotton tape (0.7cm width) in half.
13. Wrap "Anchor" Leukoplast on Barrier Film area of ETT. (Picture 9)

STRAPPING OF NASAL ENDOTRACHEAL TUBE cont'd

14. Attach the 1st Short leukoplast on the cotton tape on “folded” mark. (Picture 10)



Picture 10



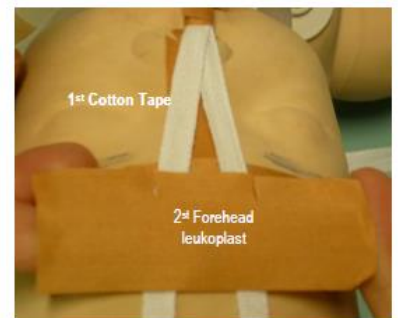
Picture 11



Picture 12



Picture 13



Picture 14

15. Position the wide cotton tape longitudinally on top of ETT. Wrap leukoplast that is on cotton tape around the ETT. (Picture 11)

16. Position the 2nd cotton tape (1.2cm) across the ETT. (Picture 12)

17. Fold 1st cotton tape over the 2nd cotton tape. (Picture 12)

18. Secure with 2nd Short Leukoplast. (Picture 13)

19. Position 1st cotton tape on Forehead Leukoplast with ends apart. (Picture 14)

20. Apply 2nd piece of Forehead Leukoplast. (Picture 14)



Picture 15



Picture 16



Picture 17

21. Turn ends of the cotton tape over the edge of leukoplast. (Picture 15)

22. Apply 3rd piece of Forehead Leukoplast. (Picture 15)

23. Repeat Action 21 and 22 until the 4th piece of Forehead Leukoplast is applied. (Picture 16)

STRAPPING OF NASAL ENDOTRACHEAL TUBE cont'd

24. Write on the 4th piece of *Forehead Leukoplast* the following information before applying to forehead: (Picture 17)
 - Date of intubation/retubation/restrapping
 - Size of NTT
 - Distance of NTT at nares
25. Cut off excess cotton tape.
26. Tie the 2nd cotton tape (1.2cm) around the infant's neck. The knot of the cotton tape should be in the groove behind the ear. (Picture 17)
27. Document procedure
28. Nurse the infant in a comfortable position. Allow the infant "time-out".
29. Discard, clean and re-stock equipment used.
30. Ensure parents are informed of outcome of procedure.

6. DOCUMENTATION

- eMR nursing notes
- Neonatal Observation Chart

7. RELATED POLICIES/PROCEDURES/CLINICAL PRACTICE LOP

- Nil

8. RISK RATING

- Low

9. NATIONAL STANDARD

- Standard 1 Governance for Safety and quality in Health Service Organisation
- Standard 8 Preventing and Managing Pressure Injuries

10. ABBREVIATIONS AND DEFINITIONS OF TERMS

NCC	Newborn Care Centre	ETT	Endotracheal Tube
LOP	Local Operations Procedure	RN	Registered Nurse

11. REFERENCES

Nil

12. AUTHOR

Primary	15/7/2005	KB Lindrea (CNC)
Revised	20/4/2010	KB Lindrea (CNC)
	April 2014	KB Lindrea (CNC), NCC Policy/ Procedure Working Group
	26/6/2018	KB Lindrea (CNC)