

## Suctioning

### What is suctioning?

Suctioning is removing mucus and fluids from the nose, mouth, or back of the throat with a bulb syringe or a catheter (thin flexible tube).

### Why does my child need suctioning?

Suctioning is usually done when a child has mucus or fluids that he or she is unable to cough up, which may block air passages.

### When do I need to suction my child?

- a “gurgle” sound of secretions
- hard time breathing
- blue or gray color around eyes, mouth, fingernails, or toenails
- you feel “rattling” on the child’s chest or back
- child seems anxious or restless, or cries and cannot be comforted
- breathing rate or heart rate increases
- nostrils flare (open wider when breathing in)
- retracting (chest or neck skin pulls in with each breath)

### How should I prepare my child?

Explain what you are going to do, using words your child can understand. You may have to swaddle your child (wrap snugly in a blanket) to prevent wiggling while you suction.

### How do I suction my child?

#### Suctioning with a catheter

1. Wash your hands.
2. Gather equipment:
  - water-soluble lubricant
  - suction catheter kit
  - suction machine
  - normal saline for lavage
  - sterile water
3. Turn on the suction machine.
4. Open the suction catheter kit, keeping everything inside the kit sterile as you open it.
5. Put some sterile water in the cup.
6. Using sterile technique, put on the glove(s). Avoid touching anything that is not sterile.
7. Pick up the suction catheter with your “suctioning hand” and the suction tubing with your other hand. Connect the two ends.
8. Apply a water-soluble lubricant to the end of the suction catheter.
9. Keep your thumb **off** the thumbport while you gently pass the catheter into the nostril to the back of the throat. This may or may not stimulate a cough.
  - If more than gentle pressure is needed to put the catheter in, stop and take it out.

10. To suction, block the thumbport with the thumb of your non-sterile hand and withdraw the catheter. **Do not suction longer than 5 to 10 seconds.**
11. Let your child rest for 15 to 20 seconds before suctioning again.
12. If mucus is thick, lavage with 3 to 5 drops of normal saline into the nostril before suctioning.
13. You may need to rinse the catheter by suctioning some water through it.
14. After suctioning the nose, you can use the catheter to suction the back of the mouth if needed. If you do this, do not use the catheter to suction the nose again.
15. Throw away the used catheter kit.
16. Suctioning some water through the suction tubing.
17. Turn off the suction machine.
18. Wash your hands again.

### **Suctioning with a bulb syringe**

A bulb syringe is used to clean the nose or to remove mucus that has been coughed up. Most suctioning can be done this way. You may use this method as often as needed.

1. Wash your hands
2. Squeeze the bulb until it is collapsed.
3. Place the tip in the nose or mouth and release the bulb. This will create suction and bring the mucus into the bulb.

4. Remove the bulb syringe from the nose or mouth and squeeze it into a tissue to get the mucus out.
5. After use, wash the bulb syringe in hot soapy water, squeezing the bulb several times. Squeeze in clear hot water to rinse.
6. Wash your hands again.

### **When should I call the doctor?**

- child coughs up fresh blood
- fresh blood is in the mucus you suctioned
- hard time breathing even after suctioning
- increased mucus
- mucus changes color
- mucus becomes thicker and does not thin after putting a few drops of sterile salt water in the nose
- fever
- lip or nail color becomes darker

### **Questions?**

This sheet is not specific to your child but provides general information. If you have any questions, please call the clinic.

For more reading material about this and other health topics, please call or visit the Family Resource Center library, or visit our Web site: [www.childrensmn.org](http://www.childrensmn.org).

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