



Policy Name	Policy Number: 0271
OROPHARYNGEAL SUCTIONING	Effective Date: December 2, 2009
Approved By: Management Committee	Date Revised:
Classification: Pain and Symptom Control	Page No: Page 1 of 2

POLICY

In hospice/palliative care, as death approaches many residents develop "noisy", "gurgling" or "rattling" respirations. This is caused by the accumulation of pharyngeal and pulmonary secretions in the airway. These residents may be unconscious, semiconscious or too weak to produce an effective cough to clear the secretions. These noisy respirations can be very distressing to the family/health advocate and visitors, they may request suctioning of the resident's secretions be done. Oropharyngeal suctioning is not recommended as it is distressing for the resident, ineffective if secretions are beyond the catheter length and may increase the production of secretions.

Oropharyngeal suctioning, using a Yankauer suction catheter, may be attempted if **all** alternative **methods** to improve the respirations have failed and secretions are visible in the mouth.

PROCEDURE

Discuss with the family/health advocate:

- a. the cause of the "noisy" respirations;
- b. the alternative methods available to improve respirations, such as medications; repositioning (see section below);
- c. the pros and cons of oropharyngeal suctioning and when suctioning might be beneficial;
- d. suctioning will only consist of removing secretions inside the mouth and at the back of the throat.
- 2. Document the discussion in the progress notes section of the resident's health record.

To help alleviate or improve "noisy" respirations:

- 1. Elevate the resident's head of the bed to facilitate postural drainage.
- 2. Reposition the resident from side to side to assist in mobilizing the secretions.
- 3. Encourage the resident to cough, if able, to assist in mobilizing and expectorating the secretions.
- 4. Use sponge toothettes or gauze to remove any secretions from the mouth.
- 5. Administer ordered anticholinergic medications to suppress the production of secretions. If there is not an order for anticholinergic medication, contact the





OROPHARYNGEAL SUCTIONING

	0271
Page No:	
	Page 2 of 2

0074

Policy Number:

attending physician or designate to obtain an order for these medications, if beneficial and/or appropriate for that resident.

6. If the resident appears distressed by the accumulation of secretions, administer medications as ordered by the physician to help improve the resident's comfort level such as, but not limited to, narcotics or benzodiazepines.

If the above actions do not improve the "noisy" respirations, the RN may decide to try oropharyngeal suctioning. This is to be done with a Yankauer suction catheter and **will only** involve removing secretions present in the mouth and back of the throat.

It is important that the resident, family/health advocate understand that **suctioning beyond the back of the throat will not be done.**

- 1. Set up suction equipment at the bed side.
- 2. Attach the Yankauer suction catheter to the suction tubing.
- 3. Prepare water in a container for rinsing the suction catheter and tubing.
- 4. Explain to the resident and family/health advocate the procedure.
- 5. Don Personal Protection Equipment (PPE), including a surgical mask and eye protection. If Influenza Like Illness (ILI) is suspected, a N95 mask and eye protection should be used.
- 6. Suction secretions inside the mouth and at the back of the throat. Do not extent the catheter past the back of the throat, as this will cause gagging and distress to the resident.
- 7. Rinse the suction catheter and tubing by flushing with water.
- 8. Provide additional mouth care with sponge toothettes.
- 9. Document procedure, effectiveness and tolerance by the resident, including resident/family/health advocate discussion in the progress notes section of the resident's health record.

CROSS REFERENCE

Policy # 0272 - Tracheostomy: Management, Care and Tracheal Suctioning.

REFERENCES

Symptom Control – Manual of Hospice Care and Palliative Care – Terminal Respiratory Congestion ('Death Rattle'), page 8

- EPAL Grampians Regional Palliative Care Team Noisy Breathing Suction or no Suction?
- MedSurg Nursing, Jan-Feb, 2009 Understanding and Responding to the Death Rattle in Dying Patients Page 3