Repeat Percutaneous Tracheostomy without Bronchoscopy

Ahmed K., MS FRCS; Sharif M., DLO FRCS
King Abdulaziz Medical City National Guard Health Affairs Al Ahsa, Saudi Arabia

INTRODUCTION

Percutaneous tracheostomy (PTD) has now become an acceptable alternative to open surgical tracheostomy in critically ill patients. As a result, several techniques now exist to perform a PTD and the Ciaglia single dilatation, followed by placement of a #7 or #8 Ultraperc tracheostomy tube, Position of the tube was reconfirmed by palpation and chest auscultation. The tracheostomy tube was secured with silk stitched to the skin and tape tied around the neck.

METHODS AND OBJECTIVES

Eight adult patients for repeat tracheostomy were prospectively studied to evaluate the safety and feasibility of a repeat PTD technique. The main objective was to evaluate the feasibility and the safety of a repeat PTD technique in patients who had previous tracheostomy, when performed by experienced surgeons, even without the use of a bronchoscope.

RESULTS

Eight of the 10 consecutive PTD patients were identified as patients who had previous tracheostomy and made up our study population. The patients were identified from the tracheostomy tube was inserted in place. The overall success and complication rate were 100%, There were no major complications.

CONCLUSIONS

We conclude that repeat PTD is a feasible and safe procedure in patients who had previous tracheostomy, when performed by experienced surgeons, even without the use of a bronchoscope. Our complication rate of 12.5% is similar to that reported in other studies. We do not use routine bronchoscopy to confirm guidewire placement in the trachea. We have had extensive experience (more than 250 cases) in performing PDT without bronchoscopy with low morbidity and mortality.

REFERENCES