LARYNGECTOMY TUBE/STOMA VENT

- A laryngectomy tube or stoma vent is an appliance inserted into the stoma (breathing hole) to keep it open. If this tube comes out, this is ok. Rinse and slide the tube back into the stoma. If the patient loses the tube, another one can be ordered and purchased by the patient from Inhealth Technologies, Atos Medical, or any durable medical equipment company. The patient may need a prescription faxed to the company.
- Some laryngectomy tubes will have a holder for a heat-moisture exchange (HME) filter. These filters should be changed and discarded at least every 24 hours.

TRACHEOESOPHAGEAL VOICE PROSTHESIS (TEP)

- After a laryngectomy, patients may leave the hospital with a Red Robinson Catheter in place for a primary TEP. This catheter is sometimes used as a feeding tube or just to hold the puncture site open for a future TEP. The stoma is the new breathing hole in the neck; TEP is the hole in the back of the stoma used for communication. A TEP is used with a laryngectomy patient. The device is inserted through the back wall of the stoma for communication. This tube sometimes comes out. This is a bigger deal if it comes out because the puncture hole can close and the patient will also aspirate liquids through this hole.
- Instruct the patient to reinsert his or her provided Red Robinson Catheter back into the hole and make an appointment to see Speech. If the patient is unable to reinsert the catheter or doesn’t have the catheter, he or she needs to see Speech as soon as possible or go to the UAB emergency room.

STEPS TO REPLACE CATHETER

1. Clean and rinse the Red Robinson catheter.
2. Pull back on the skin around the puncture site so the opening can be visualized.
3. Slide catheter back in, leaving approximately 2 inches of the catheter outside of the opening.
4. Secure by taping catheter to the skin.
5. Call the ENT office at 205-934-9766 for assistance and to make an appointment to see Speech.
BARIUM SWALLOW VS MODIFIED BARIUM SWALLOW

• Barium swallow is a procedure used to examine the upper GI tract, which includes the esophagus and, to a lesser extent, the stomach. This test does not examine aspiration. The speech language pathologist (SLP) is not present at the test. The patient needs to be NPO (nothing by mouth) for this exam.
• Modified barium swallow is a procedure performed with the SLP to assess dysphagia and aspiration. The patient does NOT need to be NPO for this exam.

LEAKS

• If a patient is experiencing a leakage of food or liquid from the neck, it is important to know what kind of surgery was performed.
• If it was a laryngectomy and a TEP was placed, find out if the leakage is coming from the TEP.
• If the patient is leaking from TEP, an appointment with Speech is needed.
• For any other leak, patient needs to be NPO and make an appointment with the doctor.

ORDERING LARYNGECTOMY SUPPLIES

• The doctor will need to sign the prescription.
• Patients may contact the clinic for a prescription.
• The form should be faxed back to the company.
• The original copy of the prescription should be placed in the patient’s chart.

CONTACT NUMBERS TO ORDER SUPPLIES

• Inhealth Technologies — Phone: 1-800-477-5969
• Atos Medical — Phone: 1-800-217-0025
• EdgePark Medical — Phone: 1-888-394-5375

OTHER SUPPLIES

• Some products require an order from the physician before the product can be shipped to the patient. Some supplies may not require an order, such as stoma bibs, tube holders (neck straps), scarfs, cleaning supplies, etc. Patients may contact the company directly to place these orders.
• Boston Medical Products — Phone: 1-800-433-2674
• Fax: 1-508-898-2373
• www.bosmed.com
• Bruce Medical — Phone: 1-781-894-9519
• www.brucemedical.com

If you have any questions or problems and it is during office hours (8:00 am-5:00 pm, Monday-Thursday) (8:00 am-4:00 pm Friday), please call our nurse at 205-801-7801, option 2.

After hours and weekends, page the ENT resident on call at 205-934-3411.