ASSESSMENT & PREPARATION

Suction Pump

Suction pumps use a negative vacuum created by an internal pump to remove blood or secretions from oral and nasopharyngeal cavities.

USE FOR
Patients with secretions or blood in the mouth, nostrils, and upper airways.

STANDARD OF CARE
Neonates should be suctioned between -60 to -100 mmHg for less than 10 seconds.

PREPARE DEVICE
A. Connect the patient suction tubing to the collection reservoir port labelled “patient.”
B. Plug the power cable into the wall if needed and turn on suction pump.
C. Adjust the suction vacuum to desired level then test the suction by suctioning water from a small container.

PREPARE PATIENT
Follow hand washing protocol and put on gloves.
Inspect patient’s oral and nasopharyngeal cavities for secretions or blood.
With the suction catheter measure suction depth from the nose to the ear and halfway back, mark distance with a small piece of tape.

SUCTION PATIENT
Place patient in a neutral position.
Pinch or occlude catheter and insert gently into mouth or nostril to point marked with tape.
Release pinch or occlusion as you withdraw catheter slowly, gently rotating until completely removed.
Rinse catheter with water and repeat process in other nostril.

REMOVE PATIENT FROM DEVICE
Gently withdraw suction catheter from patient’s oral or nasopharyngeal cavity.
Safely dispose of reservoir contents and patient suction catheter.

COMPLICATIONS
- Hypoxia
- Trauma
- Vomiting
- Vagal stimulation

Gently suction infant for NO MORE than 10 seconds. Allow infant to recover before suctioning again.

DISINFECTION & INFECTION PREVENTION
- Clean hands with soap and water or alcohol before and after handling materials that will be used on a patient.
- All tubing must be disinfected IMMEDIATELY after use otherwise bleach re-processing may be inadequate for disinfection.
- Ensure all items are new or have been cleaned before use.
- Disinfect suction pump housing and pressure gauge control with 70% alcohol.

Refer to the General Infection Prevention Module.
Suction Pump

Suction consumables should be kept nearby for easy access in case of emergency.

**DAILY MAINTENANCE**

If a suction pump is battery powered, it should be taken off its charger only as necessary to ensure that it is charged for use in the event of a power blackout.

**PREVENTIVE MAINTENANCE**

The suction pump should be turned on and allowed to run for at least 15 minutes every week if it has not been in use.

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**If the suction pump is not turning on**

- Check that the machine’s power cable is firmly secured and power at the socket is on.

**If the suction pump stops suctioning**

- Check that the float valve is installed in the lid of the collection reservoir and in the correct orientation.
- Ensure collection reservoir is not full. If full, empty and continue the procedure.

**Cleaning the machine routinely for infection prevention**

- Yankauer sucker and patient catheter must be cleared of debris by suctioning clean water following each use.
- Patient suction tubing to the reservoir must be cleaned IMMEDIATELY between every patient (see diagram below).

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**Contact a technician or maintenance department if device continues to not work properly after addressing the common issues**