

# Before You Go Home with a Laryngectomy

Your surgeons made a new pathway for air (called an airway) to flow into and out of your lungs when you breathe. They made a hole (called a stoma) in your neck and put in a laryngectomy tube (also called a lary tube). Air flows into and out of the lungs through the lary tube instead of your nose and mouth.

You need to know how to take care of your lary tube before you leave the hospital. Here are the things you must know how to do before you go home:

Activity	The nurse has shown me how to do this. <i>(Nurse initials)</i>	I know I can do this. <i>(Patient and/or caregiver initials)</i>
Remove and replace the lary tube in the stoma		
Clean the lary tube		
Clean the skin around the lary tube		
Suction the lary tube		
Remove and replace the heat moisture exchange (HME) device.		
Always keep the lary tube moist with the HME or humidified air.		

My lary tube is size \_\_\_\_\_.

I confirm that I can complete these laryngectomy home care steps.  
I have reviewed all the steps with the discharge nurse.

Patient/caregiver signature \_\_\_\_\_

Date \_\_\_\_\_

Discharge nurse signature \_\_\_\_\_

Date \_\_\_\_\_

## What is laryngectomy?

Laryngectomy is surgery to take out the larynx, or voice box. Your surgeon took out your larynx as part of your cancer treatment.

The larynx contains your vocal cords that create sound when you speak or sing. After your larynx is taken out, you will not be able to speak.

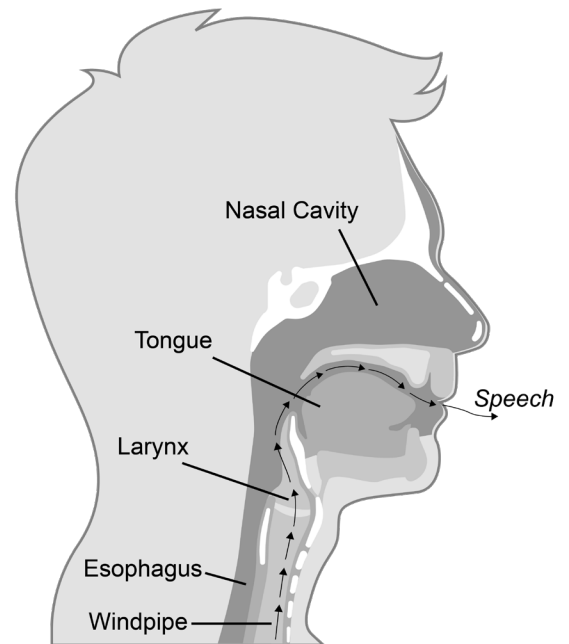
Your windpipe (also called trachea) and esophagus are connected at the back of your mouth. The esophagus is the tube that carries food from your mouth to your stomach. Sometimes food or liquid can get into the windpipe. When this happens, the larynx protects your lungs by making you cough.

## After the surgery

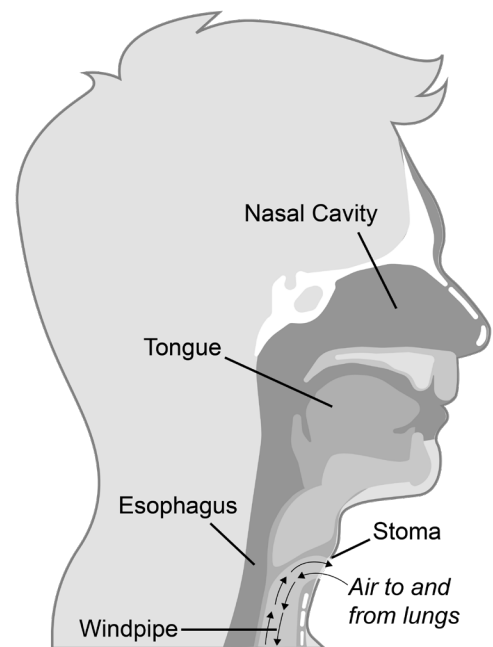
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Your care team taught you how to take care of your lary tube and the area around it while you were in the hospital. These instructions will help you and your caregiver remember when you are at home.

Before the operation, your nose warmed and moistened your breath. This kept your windpipe and lungs from



*Before laryngectomy*



*After laryngectomy*

*continued on page 2*

**If you have questions or concerns about your lary tube, call**

Monday–Friday, 9 a.m.–4:30 p.m.  
801-587-4566

Monday–Friday after 4:30 p.m., weekends, holidays  
801-581-2121

Ask for the ear, nose, and throat doctor.

drying out. After your larynx is taken out, you need a way to moisten the air coming in. There are two ways to do this:

- Breathe humidified air. This works when you are at home.
- Wear a device called a heat moisture exchanger (HME). The HME fits over the end of your lary tube. You need this any time you leave your home.

Your esophagus and windpipe are no longer connected. Now it is not possible for food and liquid to get into the windpipe. You can't choke on your food. You can still cough as usual.

### General tips

Keep your stoma and lary tube dry. **When you shower or bathe, do not let any water get near or in the lary tube opening.** Never let the stoma or tube go under water.

Wear your lary tube and HME 24 hours every day. Put in a new HME every day. If the HME gets clogged, you may need to put in a new one sooner. Throw away the used HMEs. Do not wash and reuse them.

When you get home from the hospital, call your local fire department non-emergency number. Let them know a person with a laryngectomy lives at your address. This helps them be ready if you ever need to call 911.

### Supplies you will need

Here is a list of supplies you will need to care for your lary tube and stoma at home:

- Suction machine. Before you leave the hospital, your care team will set up rental of a suction machine from a health care company. The person who delivers the machine will show you how to run it.
- Suction tubes, also called catheters
- Y connector to control suction
- Premeasured "bullets" of saline solution to help thin mucus
- Extra lary tube
- HMEs
- Cleaning supplies such as gauze, saline solution, sterile or distilled water, and tools to clean inside your lary tube and inner cannula

Your care team will give you a starter kit of supplies. After that, the health care company that brings the suction machine will bring the supplies you need. They

may not look exactly the same as pictured on page 3 of this factsheet. If this happens, ask the person who delivers the supplies for instructions about the type of machine and supplies you have.

### How do I take care of my lary tube and stoma?

You need to clean your lary tube and airway at least once a day. Also clean it whenever it becomes hard to breathe or you feel like mucus has collected.

Follow these steps to clean your tube and stoma. The picture on page 3 may be helpful.

1. Work in a clean space near a sink and mirror. Make sure you have plenty of light. You need these supplies:
  - Suction machine
  - Clean suction tube
2. Wash your hands with soap and warm water.
3. Get ready to suction.
  - a. Turn on the suction machine.
  - b. Put the suction tube on the machine using the Y connector. Note: One arm of the Y connector has no tube attached.
4. Do the suction.
  - a. Put the tip of the suction tube into your lary tube or stoma. Look in the mirror to help get it started. Slide the tube down until you start to cough. **This will be about half the length of the suction tube.**
  - b. Cover the open arm of the Y connector with your thumb.
  - c. With your other hand, slowly pull the suction tube out of your lary tube, rolling it between your fingers as it comes out. It should take 5–10 seconds to get the tip of the suction tube out of your lary tube.
  - d. The suction may not work if your mucus is too thick. If this happens, empty a saline solution bullet into your lary tube.
  - e. Relax and breathe for a few minutes before trying to use the suction tube again.
  - f. When you have finished, turn off the suction machine. Throw away the used suction tube.

*continued on page 3*

5. Take out your lary tube. You can breathe normally when it is out. Clean the lary tube with warm water and soap. Make sure to remove all mucus. Put the lary tube back in your stoma right away. Unless your care team gives other instructions, wear your lary tube at all times.

You may gag a little while doing the suction. This is normal.

You may see a small amount of red blood mixed with the mucus. This is normal.

### When to call your care team

Watch for these signs of possible infection or other problems with your lary tube:

- Fever higher than 100.3° F
- Redness or swelling on neck getting worse
- More than one cup of bright red blood in the mucus

### **If any of these things happen, call**

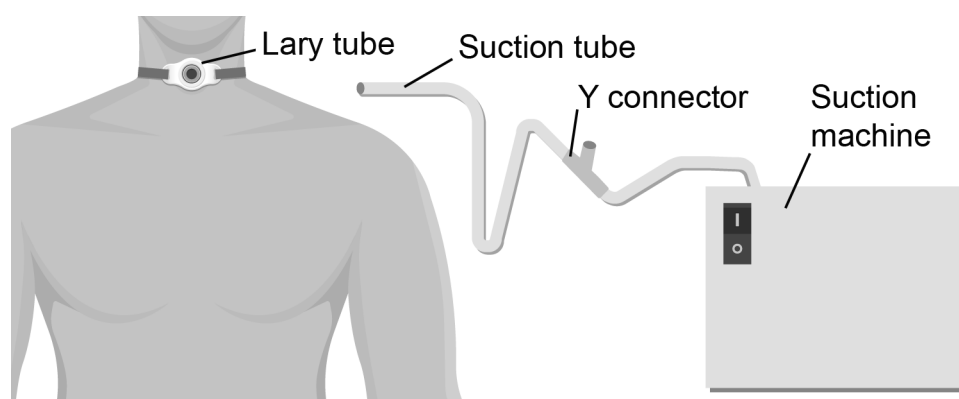
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*Suction machine set-up*

### Your Notes

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