PURPOSE:
To obtain specimen for the culture of respiratory pathogens by tracheal suctioning via nasopharyngeal route.

CONSIDERATIONS:
1. Sputum is a mucous secretion produced in the lungs and bronchi. There are several methods of obtaining specimens:
   a. Expectoration.
   b. Tracheal suction.
2. Mouth care is given prior to specimen collection to decrease contamination with oral bacteria and food, if specimen is obtained by expectoration. (Literature suggests that specimen should be collected prior to brushing teeth or using mouthwash, only using water to clean mouth.)
3. It is optimal to schedule specimen collection prior to breakfast.
4. Oxygen-dependent patients should receive oxygen before and after tracheal suctioning.
5. Specimen must be transported in appropriately marked leak-proof, unbreakable container.

EQUIPMENT:
Impervious trash bag
Sterile specimen container or in-line collection trap
Tissues
Basin
Cup with mouthwash
Suction catheter
Sterile gloves
Flashlight
Tongue blade
Normal saline
Gloves
Mask, goggles

[Note: Tracheal suction kit will include sterile suction catheter and gloves.]

PROCEDURE:
1. Adhere to Standard Precautions.
2. Expectoration:
   a. Explain procedure to patient.
   b. Position patient in high-Fowler's position.
   c. Have patient rinse mouth with water.
   d. Instruct patient to breathe deeply, cough and expectorate into sterile container. Instruct patient to avoid touching the inside of the container.
   e. Cap and label container immediately. Note on label any antibiotic therapy patient is receiving or has recently completed.
   f. Offer tissue to patient to wipe mouth.
3. Tracheal suction:
   a. Explain procedure to patient.
   b. Check suction machine to be sure that it is operating correctly.
   c. Fill basin with normal saline.
   d. Place patient in semi- to high-Fowler's position.
   e. Connect in-line trap collection container to the suction tubing.
   f. Put on gloves. Attach sterile suction catheter to tubing of specimen trap container.
   g. Instruct patient to tilt head back. Lubricate catheter with normal saline and gently pass suction catheter through nostril.
   h. If obstruction felt in nares, attempt other side.
   i. As catheter reaches juncture of larynx, patient will cough. Immediately pass catheter into trachea. At this time, instruct patient to take several deep breaths to ease passage of catheter.
   j. Apply suction for 5 to 10 seconds. Discontinue suction and remove catheter.
   k. Detach catheter from specimen trap. Holding the catheter in gloved hand, remove glove, enclosing the catheter, and dispose in impervious bag.
   l. Disconnect specimen container from suction machine, leaving tubing attached to lid. Seal container by looping tubing to other opening on lid.
   m. Label container. Note on label any antibiotic therapy patient is receiving or has recently completed.
4. Discard soiled supplies in appropriate containers.
5. Transport specimen in an appropriate container.

AFTER CARE:
1. Document in patient's record:
   a. Time, date and delivery of specimen to laboratory.
   b. Color, consistency and odor of sputum.
   c. Method of specimen collection.
   d. Patient's response to procedure.
   e. Communication with physician.