HACKETTSTOWN REGIONAL MEDICAL CENTER CARDIOPULMONARY SPUTUM INDUCTION

Effective Date: March 2010 Cross Referenced: Reviewed Date: 3/2010 Revised Date: 12/2012

Policy No: 3B.016 Origin: Cardiopulmonary Authority: Cardiopulmonary Manager Page: 10f 1

SCOPE

All members of the Cardiopulmonary Department

PURPOSE

To mobilize/expectorate mucus & obtain a sputum specimen.

Equipment:

- 1. Wall Suction canister with tubing
- 2. Sterile mucus container or mucus trap (lukens trap)
- 3. Nebulizer setup with mask
- 4. 5cc 3% saline solution
- 5. Lubrication
- 6. French suction catheter package
- 7. Gas source, i.e. wall O2

PROCEDURE

- . Obtain order from doctor/task in Cerner for procedure.
 - 2. Explain procedure to pt.
 - 3. Initiate 5cc- 3% saline nebulizer treatment to assist/mobilize secretions.
 - 4. Coach deep breathing while taking treatment.
 - 5. Observe patient throughout procedure for distress, bronchspasms & assess vital signs (heart rate, respiratory rate, oxygen saturation)
 - 6. Once complete ask pt to expectorate (if able) into sterile container.
 - a. If pt is unable to cooperate, connect suction catheter & specimen trap to wall suction.
 - b. Maintain sterile technique. Lubricate end of catheter & suction patient orally/nasally with suction catheter. Seal mucus trap when specimen obtained.
 - 7. Seal/label specimen container & place in bag.
 - 8. Give specimen to RN.
 - 9. Document completion in progress notes in Cerner.

Precautions:

- 1. Bronchospasms. Terminate procedure.
- 2. Bleeding due to suctioning. -Terminate procedure.
- Use Adverse Reaction Form if necessary. (See Cardiopulmonary Section 3B, Policy 14)
- 4. Document in progress notes in Cerner.
- Approved by: See signed Authority & Approval form month / year Committee Name