

**OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS  
RESPIRATORY CARE SERVICES - ADULT  
POLICY & PROCEDURE**

**NUMBER: 5646**

**VERSION: 2**

**SUBJECT/TITLE: ENDOTRACHEAL TUBE CARE**

**POLICY:** Endotracheal Tubes (ETT) will be secured with either the AchorFast Oral Endotracheal Tube Fastener or the Mustache Tape Technique. Endotracheal tubes (ETT) secured with the AnchorFast Oral Endotracheal Tube Fastener will be repositioned from side to side at least every 2 hours or more frequently if the patient's condition dictates to minimize the risk of injury to the skin and or lips from unrelieved pressure. When secured using the Mustache Tape Technique, the ETT position must be changed at least once as shift or as the patient's condition dictates. The area around the ETT will be inspected for necrosis Q2 hours.

**PURPOSE:** Prevent infection or tissue necrosis and to ensure security of the Endotracheal Tube.

**DEPARTMENTS: RESPIRATORY CARE SERVICES**

**PROCEDURE: AnchorFast Oral Endotracheal Tube Fastener Procedure**

Note: The Anchor Fast tube fastener secures oral endotracheal tubes ranging in size from 5 to 10 mm in diameter.

**1. Prepare the skin**

- a. Make sure the skin is clean, dry, and free of oily residue
- b. Do not use skin gel wipes or other skin preps with the oral endotracheal tube fastener.

**2. Remove the release liners**

- a. Remove the release liners from the two skin barrier pads

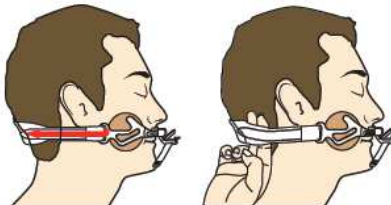
**3. Place the device on the patient**

- a. Center the device on the upper lip, just below the nasal septum, so the nonabsorbent upper lip stabilizer lightly touches the skin.
- b. Position the one-click security clamp approximately 1/2 inch below the patient's upper lip
- c. Press the two skin barrier pads against the patient's skin
- d. Hold the device in place until they adhere well. This should take approximately thirty seconds



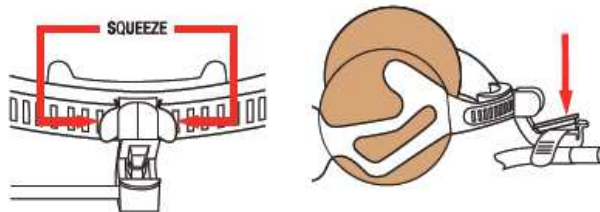
**4. Apply the adjustable neck strap**

- a. Insert the narrow end of the strap through the plastic loop on the track
- b. Fasten the narrow end of the strap using the hook and loop closure
- c. Adjust straps on either side for added comfort and security. Do not over tighten
- d. Allow two fingers width between the strap and the back of the patient's head



**5. Secure the endotracheal tube**

- a. Squeeze the tabs on the sides of the gliding tube shuttle and move the clamp along the track to a location above the tube
- b. Remove the release liner from the ET tube wrap exposing the adhesive. Before applying the wrap to the tube, make sure the tube is dry and free of any residue
- c. Position the tube under the non-slip grippers
- d. Loop the wrap tightly around the tube, and pull the remaining portion of the wrap through the security clamp
- e. Secure the wrap by snapping the one-click security clamp shut (an audible click will be heard)



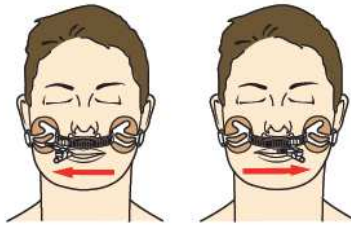
**6. Routine Care**

- a. To reposition the tube, squeeze the shuttle tabs on the outer edges and move in either direction along the tube track
- b. Endotracheal tubes (ETT) will be repositioned from side to side at least every 2 hours or more frequently if the patient's condition dictates to minimize the risk of injury to the skin and or lips from unrelieved pressure. The area around the ETT will be inspected for necrosis Q2 hours.

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**Precautions:**

- The oral endotracheal tube fastener has been evaluated in an adult population. Although it can be utilized when used with size 5-10 ETT.
- Use caution in patients with full or swollen lips, dental appliances, facial swelling, piercings, and/or protruding teeth.
- Patients who has facial piercings with ornaments. Decorative facial ornaments that may interfere with the function or placement of the endotracheal tube fastener must be taken out.
- Patients without front upper teeth or unable to wear upper dentures may lack the maxillary support required to use the oral endotracheal tube fastener.
- Patients with facial hair may lack the necessary support to anchor the skin barrier pads.
- After application of the oral endotracheal tube fastener, check the patient frequently to ensure that both the oral endotracheal tube fastener and the endotracheal tube are secure and correctly positioned.
- To minimize the risk of pressure injury, inspect the patient's lips and skin at least every two hours or more frequently if the patient's condition dictates.
- Discontinue use of the device if redness or skin irritation occurs.
- Repeated adjustment of the endotracheal tube in a distal or proximal direction may affect the performance of the ET tube wrap.
- The oral endotracheal tube fastener is indicated for single use. To help ensure proper adhesion, do not reuse.

**Change Intervals:**

- The AnchorFast ETT fastener should be replaced PRN, no more than 3-5 days or when the following exist:
  - When the foam falls to the upper lip or lower
  - When the adhesive pads are peeling
  - When the adhesive pads are discoloring
  - When visibly soiled
  - When it becomes non functional

**Technique: Mustache Tape**

1. Cut tape strips with the following lengths
  - a) 1ea approximately 24 inches long strip

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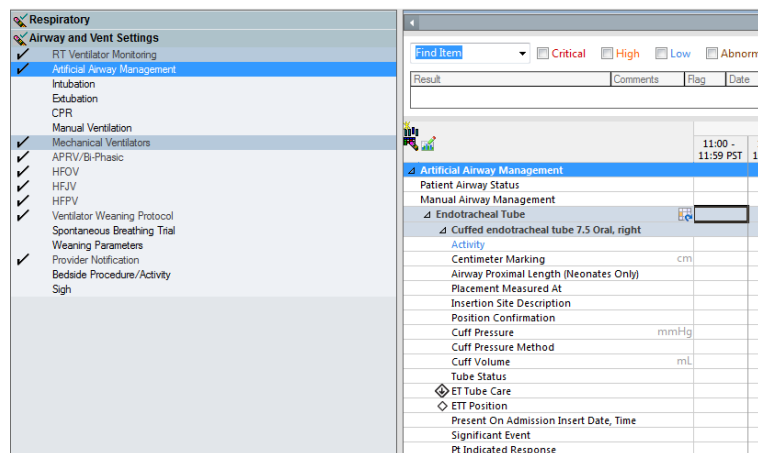
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- b) 2 ea approximately 6 inches long strips
  - c) 2 ea approximately 8 inches long strip
2. Clean the patient's skin and area of adhesive application with an alcohol prep pad and fan dry.
  3. Measure for proper sizing of tape around the neck and head
  4. Apply 8" tape to the middle of 24" tape, adhesive sides together
  5. Secure tape under neck and apply the adhesive ends to area between the nose and upper lip.
  6. Slit one strip of 6" tape half way up the middle.
  7. Apply the top half of the tape to the space above the upper lip, and wrap the lower half around the endotracheal tube.
  8. Apply the second strip of 6" tape in similar fashion to the space above the upper lip from the opposite direction.
  9. Apply one 8" strip of tape over 6" strip to secure in place
  10. A nasal endotracheal tube may also be secured with this technique.

**Documentation:**

- ETT Care must be documented in the Electronic Health Record (ORCHID)



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References:	
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