



Health education Number: ANES-101

Set date: 2013.11.01

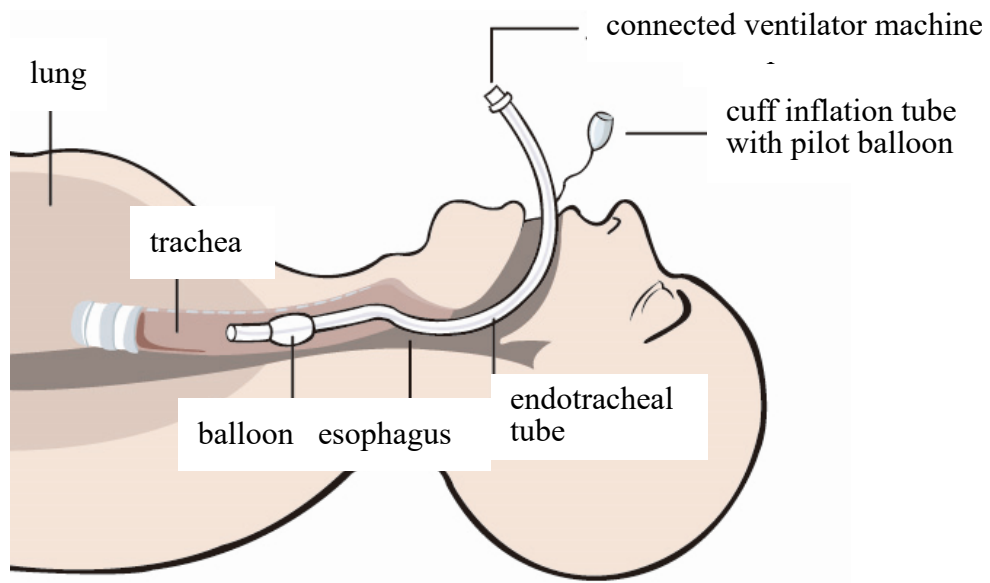
Revise date:2016.03.30

Review date:2023.10.23

The Introduction for endotracheal tube weaning post operation and anesthesia

The Purpose of Endotracheal Intubation

Anesthesiologists select the general anesthesia to keep you asleep or sedated depending on the type of surgical procedure and your medical condition. General anesthesia can influence breathing. If your procedure requires general anesthesia, the anesthesiologist needs to do something to help you breathe while you are undergoing the procedure. Your anesthesiologist may place a breathing tube (often called endotracheal tube) into your trachea through your mouth or nose. Once the breathing tube is placed, a ventilator machine will help you to breathe.



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All information above has been reviewed by Anesthesiology specialists
Edited and published by the Department of Nursing,
Taichung Veterans General Hospital

After the procedure, you will be transferred to the recovery room for close observation until the anesthesia wears off. When you gradually wake up from anesthesia, you may feel there is a tube in the throat. Due to the endotracheal tube with a balloon for fixing in the trachea, you can not speak out and can not breathe or swallow naturally. In addition, you may also feel there is something stuck in the throat, you may have sore throat, nauseated, or vomiting. In order to prevent you removing the breathing tube by yourself. Your arms may be restrained and unable to move freely. You will feel better when the endotracheal tube is removed.

How to Express Your Needs

When you gradually wake up from anesthesia, the nursing staff will stay at the bedside to monitor your heart rate, blood pressure, and respiration. If you feel discomfort, wound pain, nausea, vomiting, or phlegm in your throat while being intubated, you may communicate with them by writing, nodding head or tapping on bed. Please rest assured that your needs will be handled immediately.

When Will You Wean from the Endotracheal Tube and Ventilator

While you are waking up from anesthesia, your muscle power and vital sign will be evaluated by the nursing staff. The weaning process will begin once you pass the assessment. At that point, please follow the instructions given by the nursing staff. During this process, you may feel discomfort or hard to breathe, please try to keep calm and breathe normally. The time for this process will be based on individual's health status.

Should Never Be Self-extubated

Placed endotracheal tube will make you feel extremely uncomfortable and you may want to remove the tube by yourself. However, it is dangerous to self-extubated when the anesthetic has not been metabolized completely, and your muscle strength has not recovered from the anesthetic. According to the study, unplanned extubation may result in damage to the respiratory tract, throat swelling, difficult re-intubation, or

even asphyxia due to respiratory distress. Re-intubation may also cause respiratory infection, prolonged hospitalization, or even life-threatening. Therefore, please do not try to remove the endotracheal tube by yourself.

Let's take the quiz to make sure you understand

1. During tracheal intubation, there is something or sputum in the throat, or a sore throat.

☐Yes ☐No ☐Don't know

2. I have a endotracheal tube and feel like I can't breathe, speak, or swallow water.

☐Yes ☐No ☐Don't know

3. You can remove the endotracheal tubes from yourself.

☐Yes ☐No ☐Don't know

4. When strength is restored and the strength of the hands and feet is restored and you can breathe on your own, the endotracheal tube can be removed.

☐Yes ☐No ☐Don't know

5. If the vital signs are stable, the physician will evaluate whether the endotracheal tube can be removed.

☐Yes ☐No ☐Don't know