

Name of Child: _____ Date: _____

Nesting With a Tracheostomy

What is nesting?

You need to know how to take care of your child before taking him or her home. The best and safest way to find out if you are ready is to practice here in the hospital. We call this practice **nesting**.

When you are nesting, your family does all the care for your child here in the hospital. You pretend you are home, taking care of your child with no nurse or doctor at your side.



**When you are nesting,
your family does all the care
for your child in the hospital.**

Why do we have to do nesting before we can go home?

Your family has to learn many new skills to be able to take care of your child with a tracheostomy. At least two people at home need to learn how to take care of your child, practice what you've learned, and know what to do if problems happen. By nesting, you find out how well you know these new skills. It will help you feel more comfortable going home with your child, because you will learn that you are ready to do it safely.

Why do two adults at home have to know all these skills? Isn't one person enough?

When a child has a tracheostomy, a caregiver always needs to be nearby. One person cannot do this care alone. Everyone needs to sleep, has other important things to do, and sometimes needs a break. That person may get sick, and be unable to care for the child. So, to be safe, two adults need to learn how to take care of the child with the tracheostomy. Both adults must learn all the skills needed. Each must nest with the child for at least 24 hours.

How do we get ready for nesting?

First, we find out what medicine and equipment your child will need at home.

You get your child's prescriptions filled. Both of the adult caregivers will learn how to measure the right doses of medicine and learn when and how to give them to your child.

Then, a Case Manager has the equipment you will have at home brought to the hospital. This may include a portable suction machine, SVN machine, apnea monitor, oximeter, and a feeding pump. If your child needs a machine to breathe, you will also get a ventilator. Both of the adult caregivers will learn how to use all of these machines.

What will we do during nesting?

After you learn these skills, each adult caregiver will spend 24 hours in the hospital taking care of the child. This means doing everything you will do at home: feeding, diapering, playing, and trach care. This is your chance to practice what you have learned, find out what you don't know, and ask questions.

Some problems may come up while you are nesting, and you may have trouble figuring out what to do. For example, the apnea monitor and the oximeter may both alarm at the same time. Or you may find the suction machine doesn't work.



Nesting is your chance to practice what you have learned, find out what you don't know, and ask questions.

While you are nesting, you can ask nurses and respiratory therapists questions. By doing all the care in the hospital, you will be best prepared to take care of your child at home.

Does nesting really help?

Yes, nesting really helps you get ready to take care of your child at home. Every family that has gone home with a child with a tracheostomy has told us the care was much harder than they thought it would be. There is so much to learn and remember! The best way to get ready for home care is nesting. You pretend you are home, practice what you've learned, and, when you find you don't know what to do, ask questions. It will help you feel ready to go home, and to keep your child safe.

Now that you've read this

Tell your nurse or doctor what you need to learn or review before you are ready for nesting with your child. (Check when done.)



If you have any questions or concerns,

call your child's doctor or call _____

If you want to know more about child health and illness,
visit our library at The Emily Center at Phoenix Children's Hospital

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www.phoenixchildrens.org

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Disclaimer

The information provided at this site is intended to be general information, and is provided for educational purposes only. It is not intended to take the place of examination, treatment, or consultation with a physician. Phoenix Children's Hospital urges you to contact your physician with any questions you may have about a medical condition.

Monday, July 7, 2014 • DRAFT in family review

#732 • Written by Penny Overgaard, RN • Illustrated by Dennis Swain

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Name of Health Care Provider: _____

Date returned: _____ db

Family Review of Handout

Health care providers: Please teach families with this handout.

Families: Please let us know what you think of this handout.

Would you say this handout is hard to read? Yes No

easy to read? Yes No

Please circle the parts of the handout that were hard to understand.

Would you say this handout is interesting to read? Yes No

Why or why not?

Would you do anything differently after reading
this handout? Yes No

If yes, what?

After reading this handout, do you have any
questions about the subject? Yes No

If yes, what?

Is there anything you don't like about the drawings?

Yes

No

If yes, what?

What changes would you make in this handout to make it better or easier to understand?

Please return your review of this handout to your nurse or doctor or send it to the address below.

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Thank you for helping us!