

# RESPIRATORY HYGIENE



## What Should I Know About My Nasal Cannula?

### RISKY BEHAVIOUR

"I have seen so many patients drop their cannulas on the floor in some areas that have some serious questionable bacteria and germs then place this back into their nares (nose) potentially even blowing them deeper into the patients airways and potentially causing further breathing and infectious issues."

Outpatient Pulmonary  
Transitions Coordinator



### Replace nasal cannulas every two weeks.

Nasal cannulas should not be brown, stiff, or make a "whistling" noise. If they are brown or stiff, it's likely a biofilm that may contain infectious agents has formed. The whistling noise is caused by small amounts of nasal mucous that leaks into the prong opening, which provides moisture for germs to grow.

### Don't reinsert a nasal cannula that has fallen on the floor or been on a high touch surface.

Respiratory viruses can live up to a week on surfaces and fabrics. The nose is a direct route of infection into the body. Don't insert a nasal cannula prong that may have infectious material on it from contact with a floor, doorknob, bed or other surface.

### Don't expose your nasal cannula to room air.

You should cover your nasal cannula prongs when not in use to reduce exposure to respiratory viruses that "float" through the air attached to microscopic pieces of dust. Covering your nasal cannula prongs also protects them - and you - from other people's coughs and sneezes, pets, and insects.

## SOLUTIONS

- Cover the nasal cannula prongs with a tissue.
- Put nasal cannula in a bag.
- Purchase a nasal cannula cover like this one from [www.hartfielmedical.com](http://www.hartfielmedical.com).



1. Boone SA, Gerba CP. "Significance of fomites in the spread of respiratory and enteric viral disease." *Appl Environ Microbiol.* 2007;73:1687-1696. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1828811/>
2. Otter, J. A., Donksey, C et al. ". Transmission of SARS and MERS coronaviruses and influenza virus in healthcare settings: the possible role of dry surface contamination." *The Journal of Hospital Infection.* March 2016, Volume 92, Issue 3, pages 235-250. Retrieved from [https://www.journalofhospitalinfection.com/article/S0195-6701\(15\)00367-9/fulltext](https://www.journalofhospitalinfection.com/article/S0195-6701(15)00367-9/fulltext)
3. Pássaro, Leonor et al. "Prevention of hospital-acquired pneumonia in non-ventilated adult patients: a narrative review." *Antimicrobial Resistance And Infection Control* vol. 5 43. 14 Nov. 2016, doi:10.1186/s13756-016-0150-3. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5109660/>