

# 氣切患者返家之 療養指導義務

The Duty of Counselling to the  
Patients after having Intubation

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## 摘要

死者C出後即診斷為喉頭軟化症，因此氣切插管。於被告醫院住院24日後出院，卻因疑似氣切管阻塞之氣切套管事故，經急救後仍死亡。C之父母主張被告醫院與醫師未能提供適當的居家衛教，而違反注意義務。法院認為，在死者C住院期間發生3次嚴重的氣切管阻塞，則被告醫師應能清楚預見C出院後仍有極高可能再次發生氣切管阻塞。因此被告醫師負有基本指導義務，惟被告卻僅抽象指示原告居家療養，而未具體指導基本救命術、也未積極訓練原告更換導管，更未使原告意識到確保呼吸道暢通之重要性，以致於原告急救時未能即時保持C呼吸道暢通，而令C死亡。因此，

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被告醫院醫師違反注意義務，負有損害賠償之責任。

Deceased C was diagnosed with Laryngomalacia and was intubated after having Tracheotomy. C was discharged from the defendant's hospital after 24 days of hospitalization, he died after emergency treatment due to a result of a tracheal cannula incident which was suspected to be an obstruction of the endotracheal tube. C's parents claimed that the defendant hospital and physicians had breached their duty of care by failing to provide proper home nursing care. The court held that the defendant physician should have been able to foresee the high probability of recurrence of the tracheal obstruction after C's discharge from the hospital, given that three serious tracheal obstructions had occurred during his hospitalization. The defendant therefore had a basic duty of care, but he only gave the plaintiff abstract instructions on home nursing, instead of giving specific instructions on basic life-saving techniques, or actively training them to change the catheter, or making them aware of the importance of ensuring an unobstructed airway, which resulted in the plaintiff failing to maintain an unobstructed airway during the emergency treatment and C's death. The defendant including the hospital therefore breached the duty of care and was liable for damages.

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## 壹、事實概要

### 一、事件概要

本件患者C（死亡時3歲）出生後不久即被診斷為喉頭軟化症，接受氣管切開術及人工呼吸器管理。2018年7月27日至被告醫院住院24天，卻於出院隔日早晨（同年8月20日）發生了疑似氣切管阻塞的氣切套管事故，經急救後仍不幸死亡。原