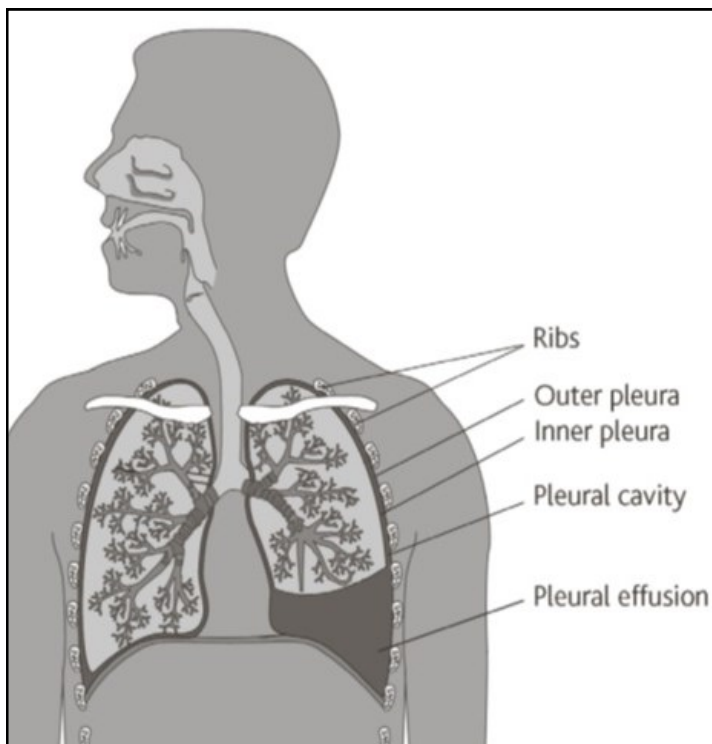


Chest Drain Insertion

What is a chest drain?

A chest drain is a small tube that is placed through your skin into the space between your lungs and rib cage (the pleural space) to drain the fluid that has built up.



Who will be doing the procedure and where?

The procedure will be carried out by a qualified doctor with a suitable level of experience. Because this is a Teaching Hospital, the doctor performing the procedure may be supervised by a senior doctor.

The procedure will take place in the procedure

room in EACU (Emergency Ambulatory Care Unit) on Level 5 of the Thomas Kemp Tower at the Royal Sussex County Hospital.

If you are an acute admission from A&E, then the procedure will be done in A&E itself to avoid any delay depending on the underlying cause.

How do I prepare for this procedure?

For an emergency procedure

Your doctor looking after you will check if you are on any blood thinning medications and advise to stop as required. You will also have blood test prior procedure.

For an elective (non-emergency) procedure

You may be asked to have a blood test a few days before you come to hospital, or on the day of the procedure. If it is on the same day, it will be a few hours before the procedure to make sure that there is no delay while we wait for your blood results.

To minimise risk of bleeding risk associated with the procedure, you may be advised to stop taking some of blood thinning medication by your doctor or from the hospital. **Please only stop taking your blood thinning medication once you have been advised to stop by your doctor or from the hospital.**

- If you take Clopidogrel, please stop taking it 7 days before the procedure date.

- If you take Warfarin, please stop taking it five days before the procedure date. You will have an INR test on the day of the procedure to ensure it is at a safe level.
- If you take newer anticoagulants Rivaroxaban, Apixaban, or Dagibatran please stop taking it or injecting two days before the procedure date.
- High dose injection like Tinzaparin or Clexane injections will need to be stopped one day before the procedure.
- You do not need to stop taking aspirin before the procedure.

Please contact your doctor or the medical team if you are not sure about stopping your blood thinning medication before the procedure.

You may eat and drink as normal.

What happens during the procedure?

You will be asked to lie down on a bed where the doctor will use an ultrasound machine to see where it is best to insert the drain. The ultrasound lets the doctor 'look' through the chest wall and also identify the safest site on the skin to carry out the procedure. It is painless and non-invasive. A cool gel is used on the skin first.

Then your skin will be cleaned and a local anaesthetic will be injected to numb the area.

The chest drain will then be inserted between the ribs in the numb area. This is connected to a tube and one-way bag or drainage bottle containing water. The water acts as a one-way seal to allow air or fluid to drain out but not go back in to your chest.

The whole procedure will usually take up to an hour.

Will it hurt?

The local anaesthetic will sting at first but it will allow the needle to be inserted without causing too much discomfort.

You may feel some pushing and pulling during the procedure. Please tell the doctor if you feel any pain.

How will the drain be attached?

We sometimes use a stitch to tie the drain in and an adhesive dressing on the skin. Please move carefully as drains can still be pulled out.

How long will the drain be in?

It depends on why you need the drain. Your medical team will keep you informed on a regular basis.

How will the drain be removed?

This is straight forward and is usually done by the doctor or a nurse. Once all the dressings are removed, the suture fixing the drain to the skin will be cut and the drain will be gently pulled out. You may be asked to hold your breath in a special way when this is done. It can be uncomfortable but only lasts a few seconds.

Are there any risks during the procedure?

There is a small risk of infection and bleeding but every effort is made to prevent this from happening.

Important things you need to know about your chest drain

- You may see air bubbling out through the bottle; this is normal. Fluid will also drain from the chest; this is usually clear but sometimes may be blood stained. This is nothing to be alarmed about.
- There is no need for you to be in pain but if you are in pain ask for painkillers.
- The drain can come out if pulled or twisted so please take care. If the drain does come out tell someone straight away.
- You need to keep the drainage bottle below the level of the drain (at the point it enters the chest). Usually it is placed on the floor.

What happens afterwards?

Some people have a little pain after the procedure which may be helped by painkillers. If you have a lot of pain, difficulty breathing, or fever please tell a doctor or nurse so they can look for a cause and treat it.

If you have noticed the drain being accidentally pulled out or disconnected, please inform the nurse or the doctor in the ward immediately.

Who can I contact for more information and support?

Emergency Ambulatory Care Unit (EACU):
01273696955 (ext 64002)

www.bsuh.nhs.uk/services/respiratory
(online patient information leaflet link)

www.patient.co.uk

Your district nurse number (please write once known)

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Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

