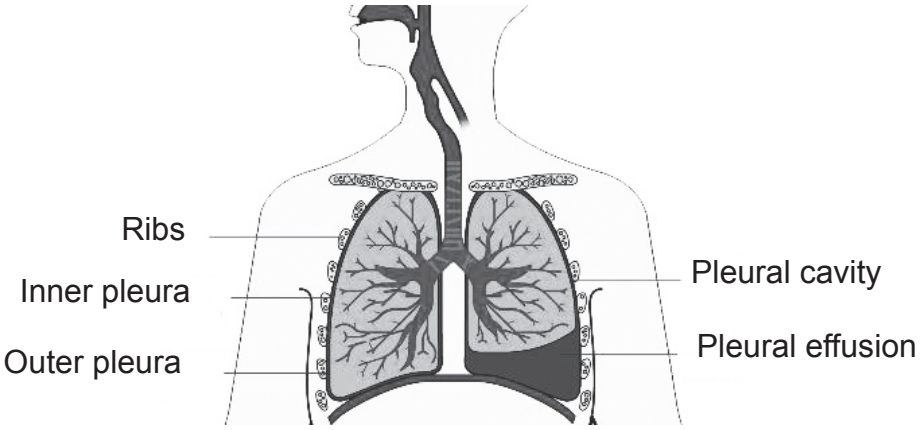
Calderdale and Huddersfield NHS Foundation Trust

Chest Drain Insertion

What is a chest drain?

A chest drain is a narrow tube inserted in the chest to drain an abnormal collection of air or fluid in the chest. It is placed in the area called the pleural cavity as demonstrated in the picture below.



The black area (pleural effusion) is the abnormal collection of fluid in the chest. A tube is placed in this area to drain the fluid.

Why do you need it?

You may have an abnormal collection of air or fluid in the pleural space which may be giving you symptoms of breathlessness or chest pain. Your doctor feels draining the air or fluid may help your symptoms improve and may also help in diagnosing why you have this collection in your chest.

compassionate care

How is a chest drain inserted and by whom?

Before you agree to go ahead with the procedure you will get a chance to discuss it with the doctor looking after you. You will be asked to sign a consent form explaining why you need this procedure and what the possible complications are. Obtaining patient consent is routine policy before doing any procedure.

A member of the team will perform an Ultrasound scan of your chest to identify where the fluid is and mark the skin where the chest drain tube should be inserted. An ultrasound is not required if you have air in your pleural cavity.

The drain is usually inserted by an experienced member of the team but occasionally it can also be done by a trainee under supervision of a more experienced senior.

You may be given liquid morphine 30 minutes before the procedure to try and minimise any pain. After positioning you appropriately and gathering the equipment, the site marked for insertion will be cleaned and local anaesthetic will be applied to numb your skin. Once the local anaesthetic has had the desired effect, then the procedure will be performed.

The other end of the chest drain tube will be attached to an underwater seal bottle which will allow air or fluid to flow out in one direction. The drain will be secured either with sutures or a special chest drain dressing. You will be given instructions to care for the drain as mentioned in the 'Looking after your drain' section below.
You will be sent for a chest x-ray after the drain is inserted to confirm position.

Frequently asked questions

Where will the procedure be done and how long will it take?

The procedure can be done either at the **bedside** or in a **dedicated room** where all the equipment is available. Occasionally it is done in the **Ultrasound department**. It usually takes approximately 20 minutes after you have been positioned appropriately.

Will it be painful?

To help with pain and discomfort you may be given **liquid morphine** before the procedure, **local anaesthetic** during the procedure and **pain killers** after the procedure.

What are the possible complications?

Complications are rare but they include **chest pain** and **cough** immediately after the drain is inserted, but this is brief and self-limiting and only reflects re-expansion of the lung when the air or fluid is drained. Very occasionally you can get **breathless** after the procedure but your doctor should be able to help you if this was to happen.
Other complications include **bleeding, damage to neighbouring structures** in your chest (the ultrasound is used to avoid this complication), and **inability to insert the drain** despite a few attempts (if this happens, then the drain will be inserted in the Ultrasound department).
Sometimes air can leak from the drain tube and collect under your skin. This is called **surgical emphysema** and is self-resolving in the majority of cases.

How long will the drain stay in?

Depending on the cause of collection of air or fluid in your chest, the drain may stay in for 2-5 days.

Can I walk about with the drain?

You can mobilise freely as long as you follow the instructions in the 'Looking after you drain' section.

Are there any additional procedures done after the drain is inserted?

Depending on the cause of why you have air or fluid in your pleural cavity, your doctor may decide to inject a chemical via the chest drain (once sufficient air or fluid has drained) to seal the pleural cavity to prevent air or fluid from building up in the future. This procedure is called pleurodesis.
Sometimes if the drain gets blocked with thick fluid or clots it will be flushed with sterile water.
Occasionally a suction tube is attached to the drain bottle to help the lung re-expand quicker.

Looking after your drain

- Always make sure the drain bottle stays below the level of your waist, otherwise the fluid in the bottle may flow back into your chest.
- Do not tamper with the 3 way tap on the drain

If the drain falls out or for any reason please inform the nursing staff immediately.

Removing the drain

This is a simple procedure. You will be asked to breathe in a particular way while the chest drain is gently pulled out. Once the drain has been removed, the doctor may stitch the wound but this isn't always necessary. Instructions for the removal of any stitches will be given to you when you leave hospital.

If you have any comments about this leaflet or the service you have received you can contact :

Respiratory Physician

Respiratory Medicine

Huddersfield Royal Infirmary Telephone No: 01484 355655

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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