UW Medicine

Caring for Your Chest Tube and Drain at Home

Atrium Pneumostat or Atrium Express Mini 500

This handout explains how to care for your chest tube and either a Pneumostat or an Express Mini 500 device.

What is a chest tube?

You are ready to go home, but you still need the chest tube and drain. Chest tube drains have a 1-way valve. The valve allows air and fluid to leave the area around your lungs until you can have your chest tube removed. The drain collects any fluid that comes out of the chest tube.

Your doctor may prescribe either a Pneumostat or an Express Mini 500 device to use with your chest tube. Both devices are made by the Atrium company.

Pneumostat

The Pneumostat is put at the end of your chest tube. It is used when only a small amount of fluid or no fluid is draining from the space around your lungs.

Express Mini 500

The Express Mini 500 connects to your chest tube. It allows air and fluid to drain out of your chest from the space around your lungs. It is used when there is more fluid draining from the space around the lungs.

How do I take care of the chest tube?

What to Check

• Check the connection between the chest tube and the drain 2 times a day or if the tube gets pulled or twisted.



Pneumostat



Express Mini 500

- If the chest tube falls out or gets pulled out:
 - Place a piece of gauze over the site. Fully cover the gauze with tape.
 - **Call us right away.** Phone numbers are listed on the last page of this handout.
 - If you have new chest pain or sudden shortness of breath when the chest tube comes out, **go to the nearest emergency room**.
- If the connection comes apart:
 - Pinch the chest tube with your fingers to close the chest tube until you can reattach the drain. If you can, clean the ends of the chest tube and the drain with an alcohol swab before reattaching. Then wrap plastic or silk tape around the connection to keep it secure.
 - **Call us right away**. Phone numbers are listed on the last page of this handout.
 - If you have new chest pain or sudden shortness of breath when the chest tube comes apart, **go to the nearest emergency room**.
- Check that there are no kinks in the tubing. Think of the tube as a garden hose. Fluid and air cannot come out if the tube is kinked.
- Keep the drain below the level of your heart. Your drain has clips or straps to hold it in place.
- Drain the fluid chamber at least once every 24 hours. You may need to drain the chamber more often depending on how much fluid is coming out. Drain the chamber before it fills all the way with fluid.
- If you feel short of breath or have chest discomfort, check the device. Make sure the connections are not damaged and that there are no kinks in the tube. If your symptoms do not get better, **call your doctor right away and go to the nearest emergency room**.

Emptying the Fluid

To empty fluid from the chamber:

- 1. Wash your hands for at least 20 seconds with warm water and soap. Rinse and towel dry. Or, you can clean your hands for 20 seconds using an alcohol-based hand sanitizer.
- 2. Use an alcohol swab to clean the port on the device:
 - On the Pneumostat, this port is on the bottom
 - On the Express Mini 500, this port is on the front
- 3. Empty a clean syringe of any air before you connect it to the port
- 4. Firmly screw the clean syringe to the port.
- 5. Pull the plunger back on the syringe to withdraw the fluid.

- 6. When you have emptied the fluid from the chamber, unscrew the syringe. Do **not** leave it attached to the port.
- 7. Check the markings on the syringe to see how much fluid you have taken out of the drain. Write this amount in your record.
- 8. Empty the fluid from the syringe into the toilet. Do **not** let the syringe touch anything.
- 9. You may need to repeat these steps more than once to fully empty all fluid from the chamber. If you remove more fluid, remember to write those amounts in your record, too.
- 10. In your record, also write the date and time you took the fluid out of the drain. Bring this record to your follow-up visit. This information will help us know when it is safe to remove your tube.
- 11. Once every 24 hours, wash the syringe that you used for emptying the drain. Use warm water and dish soap. Allow the syringe to air dry.

Changing the Dressing

Change the dressing every 2 days or if the dressing becomes wet. We will teach you how to change the dressing before you are discharged from the hospital. Call your doctor's office if you are unsure when, how, or if you need to change your dressing.

Some chest tubes do **not** need dressing changes. If you have this type of tube, your medical team will tell you. Your tube will be checked at your clinic visit within 1 week.

Follow these steps to change your dressing:

- 1. Gather your supplies.
 - Soap and water or alcohol-based hand sanitizer
 - Clean towel
 - Plastic bag or trash can
 - 2 clean washcloths
 - 1 sterile split gauze dressing
 - 1 sterile standard 4-inch by 4-inch gauze dressing
 - Tape to secure the dressing (you can use any medical tape that does not irritate your skin)
- 2. Wash your hands for at least 20 seconds with warm water and soap. Rinse and towel dry. Or, you can clean your hands using an alcoholbased hand sanitizer for at least 20 seconds.
- 3. Remove the old dressing. Be careful not to pull out the chest tube. Check that the stitch (thread) is still attached to the skin and the chest tube. Place the old dressing in the plastic bag or trash can.
- 4. Wash your hands again.

- 5. Wet 1 washcloth with warm water and use it to clean around the site.
- 6. While you clean, check the skin for any signs of infection or irritation. **Call your doctor right away if you have any of these signs:**
 - More redness of your skin (some redness at the site can be normal)
 - Any increase or change in the drainage from the site
 - Skin at the site feels warm to touch
- 7. Pat the site dry with the 2nd clean wash cloth.
- 8. Remove the slit gauze dressing from the package. Be careful to only touch the outside edge of the dressing.
- 9. Place the slit of the dressing around the chest tube at the site.
- 10. Cover the tube and slit gauze dressing with the sterile 4-inch by 4-inch gauze dressing.
- 11. Tape the edges to keep the dressing in place.
- 12. Wash your hands again.

Can I shower or bathe while I have a chest tube?

You may take a **shower or sponge bath** while the tube is in place. Do **not** take a bath, sit in a hot tub, go swimming, or immerse yourself in any water while you have the chest tube in place.

When taking a shower:

- Before you shower, cover the dressing with a shower shield or plastic wrap like Saran wrap. Use medical tape to secure the edges of the plastic wrap.
- Do **not** let the water hit the site directly. Instead, allow the water run down across the area.
- After the shower, remove the tape and plastic wrap. Pat your skin dry with a clean towel. Be careful not to pull on the tube. If the dressing is wet, you will need to change it.

Who to Call

- Weekdays from 8 a.m. to 5 p.m., call the Thoracic Surgery Clinic at 206.598.4477. When you hear the recording, press 8. Ask to talk with the Thoracic Surgery nurse or a member of the Thoracic Surgery team.
- After hours and on weekends and holidays, call **206.598.6190** and ask for the Thoracic Surgery Resident on call to be paged. Give your name and a number where we can reach you for the next 1 to 2 hours.
- If you need urgent care, call 911 or go to the nearest emergency room.

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Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

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After hours and on weekends and holidays, call 206.598.6190 and ask for the Thoracic Surgery Resident on call to be paged.