



Percutaneous Drain Discharge Instructions

What is an Image Guided Percutaneous Drain?

A percutaneous drainage placement is a procedure performed by a radiologist to remove or drain a contained collection of fluid from an area of your body. The drain is placed using a CT scan or an ultrasound machine which will help guide the radiologist to the site of the unwanted collection of fluid. During the procedure the radiologist inserts a drain catheter, which is a thin tube, through your skin into an area where unwanted fluid has accumulated. The catheter enables the fluid to drain into a drainage bag. Sometimes, drains must stay in place for weeks or months. Once the drainage becomes minimal, the drain can be removed.

Aftercare Instructions

- Resume normal activities as tolerated.
- The drainage site may be sore and tender for one to two days. You may take nonprescription pain medicine, such as acetaminophen (Tylenol) or ibuprofen (Advil or Motrin), to relieve any discomfort. If your doctor expects you to have more severe pain, you will be prescribed a stronger pain medicine. Call us if the pain cannot be controlled with your prescribed medicines.
- You may shower 24 hours after your procedure.

Caring for the Drain

- Protect the drain tube from being pulled out or dislodged.
- Be sure to **wash your hands** thoroughly before and after caring for your drain or emptying the drainage bag.
- Every time you empty the drainage bag, record the amount of fluid you collected. The drainage bag has markings on it. Estimate the total amount. **Record your output every day.** When you come for drain evaluations, bring your written record.
- Call us when the drainage output is less than about 10 ml a day for 2 to 3 days in a row. You may be ready for the drain to be removed.
- Some drains will need to be flushed daily to keep them from clogging. Your doctor will tell you if your drain needs to be flushed and how often.
- If your drain has a 3-way stopcock (valve), you can flush the drain without removing the bag. Remember that the stopcock switch (which may be marked with the word "off") points to the channel that is off.

Caring for the Dressing

- Keep your dressing clean and dry. Be sure to **wash your hands** thoroughly before and after changing the dressing.
- You may shower, but keep your drain covered with plastic wrap and tape (Glad Press 'N' Seal works best). Do not sit in a bath or hot tub or go

swimming. Fluid may get into your drain and cause infection.

- The dressing over your drain should be changed once a week, as this reduces the likelihood of infection.
- If excessive bleeding or a large amount of drainage is noted on the dressing, the dressing should be changed.
- When you leave Teton Radiology, you will be given flushing and dressing supplies. You may need to buy more supplies at a medical supply center or drugstore.

Please call your ordering doctor or primary care physician if you notice any of the following:

- Significant pain at the site unrelieved by Tylenol
- Hematoma or painful lump around the site
- Fever greater than 100.6°F
- Redness or drainage at biopsy site
- Continued nausea and vomiting

Seek EMERGENCY CARE if you have:

- Chest pain
- Uncontrolled bleeding
- Confusion or change in mental status
- Difficulty breathing or shortness of breath
- Progressive swelling of any area
- Severe abdominal pain or bloating
- Dizziness or feeling like you are going to pass out

If you have an emergency, go directly to the nearest emergency room or call 911. Do not wait to contact our staff.

Teton Radiology may be reached at (208) 524-7237, or (208) 356-4888 for Rexburg.

(Patient name - Please print)

Your radiologist was:

I understand the above information.

(Patient or family member's signature) Date

Reviewed with me by:

(Technologist or nurse) Date