PROCEDURE

ORIGINAL DATE: 09/02

SUBJECT: PLEURAL TENCKHOFF CATHETER (CHEST TUBE) CARE OF

PURPOSE: To drain fluid from space surrounding lungs.

Considerations

1. Process for care of tube, draining fluid from catheter.

- 2. Patient or caregiver will be taught principles of aseptic technique and process for draining fluid, care of tube, recording data, dressing change.
- 3. Patient/caregiver will be taught s/s to report. These include respiratory changes, cough, pain, abnormal drainage, bleeding in catheter, odors.

Necessary Equipment	
Sterile gloves, clean gloves	Protective sheet
4x4 or drain	Alcohol wipe
Sponge	Syringe with needle
Tape	Sharps container
Povidine ointment	Cup to measure fluid
Doubled waste bag	

Procedure	Rationale
1. Assess vital signs and lung sounds	To have baseline information before and after procedure
2. Wash hands	Prevent cross-contamination
3. Explain procedure	To gain patient cooperation and decrease
	anxiety
4. Assemble supplies	
5. Have patient assume comfortable position	Decrease anxiety; to protect linen and tubing;
and place protective sheet under patient	to provide a clean working field
6. Apply clean gloves	
7. Remove dressing; dispose in waste container	
8. Assess tube and insert in sight	To note changes in patient's condition and for baseline
9. Apply sterile gloves	
10. Remove catheter cap	
11. Wipe off end of catheter with alcohol wipe	To prevent infection
12. Insert tip of syringe into catheter	
13. Pull on plunger; remove fluid, drain dry,	
empty into measuring cup	
14. Recap end of catheter	
15. Record fluid amount removed, color, consistency, odor	To provide an ongoing record of dressing
16. Dispose of fluid in the toilet	Proper waste disposal
17. Dispose of syringe in sharps container	Proper waste disposal
18. Dispose of sheet, gloves, etc., in double	Proper waste disposal
bag	
19. Apply clean gloves; wash with soap and H ₂ O and apply povidine iodine to	
peripheral skin	
20. Apply dressing to tube site	
21. Secure with tape	
22. Instruct patient or caregiver to observe for	
respiratory distress, pain, increased	
dressing at insert site and report to	
physician	
23. Instruct s/s infection	
24. Wash hands	
25. Document procedure, amount of asp fluid,	
color, consistency, and patient tolerance	
26. Assess vital signs and lung sounds	