

Chest Drain System

Set Up:

- Fill water seal to 2 cm line with funnel (if overfilled, remove with syringe/needle from front face grommet)
- Remove vent plug and pour water in to fill suction control chamber to desired pressure level (-20cmH2O) and replace vent plug
- Connect to patient and secure with chest tube ties
- Initiate suction by connecting to wall suction and adjust control stopcock until steady, gentle bubbling occurs
- To place to gravity drainage (water seal), disconnect the vacuum line and leave the stopcock in the ON or OPEN position

Management of:

- Changing a drain system:
 1. Clamp patient tube
 2. Disconnect inline patient tube
 3. Reconnect new inline tube and secure
 4. Unclamp patient tube



Transporting of:

- Maintain stopcock in ON or OPEN (do not clamp off patient tube). Stopcock in open when parallel to the tubing, and OFF when horizontal to the tubing
- Disconnect suction and hang on side of bed

Troubleshooting:

1. Air bubbles observed going from RIGHT to LEFT in the air leak monitor will confirm patient air leak
2. Continuous bubbling in the H2O seal leak monitor will confirm a persistent air leak
3. Intermittent bubbling with a float ball oscillation will confirm the presence of an intermittent air leak
4. No bubbling with minimal float ball oscillation at the bottom of water seal will indicate NO air leak present

Dressings:

- Sterile occlusive dressings, cleanse with chlorhexidine prep, change with Xero-form gauze minimal Q48 hours
- MD preference may vary. Obtain order for variation of dressing or time change