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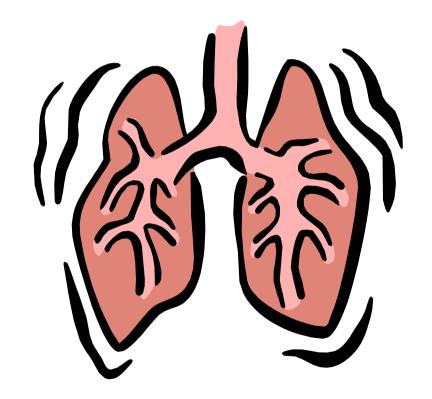
GP Ph.....

Local Hospital Ph....

Domiciliary Nurses Ph...

Local Pharmacy Ph....

Guidelines for going home with a chest tube in place or following removal of a chest tube.







Going home with a chest tube in place or following removal of a chest tube

You still have a chest tube in place

You are being discharged home with a chest tube in your chest. These guidelines will help you and your family to monitor the chest tube.

The drainage bag attached to the chest tube should be:

- Kept below the level of your chest to assist drainage
- Hung beside your bed at night at a level below your chest. Ask your nurse to demonstrate how to do this.

Assessing system	Monitor the amount and type of drainage fluid each day and keep a record for the doctor treating you. Empty fluid as shown down the toilet Ensure the tubing is free from clots and blockages If the bag is vented to release air - do not tip upside down as fluid will leak out Monitor for air leaks from the lung - either bag filling up with air or air can be heard moving across the valve
Disconnections	If the system becomes disconnected, reconnect the device to the chest tube and seek medical advice immediately.
Tube falls out	Place dressing over wound and seek medical advice. If you are short of breath or in pain, phone ambulance
Unwell	If you are feeling unwell report to a medical officer for assessment
Dressings	Should be changed when wet or soiled and at least every two days by domiciliary nurses, family or general practitioner
Hygiene	The dressings will need to be covered for the shower with a plastic bag and some tape

Your chest tube has been removed

Examine your wound daily to ensure wound healing. A small dry dressing (for example a bandaid) may be appropriate to prevent irritation of clothing on insertion site or suture. You will be told when any sutures (stitches) should be removed and by whom. You will be able to shower normally but swimming should be avoided until the wound has completely healed.

Potential complications for all patients

You must remain vigilant for signs or symptoms that may indicate that

- air or fluid is re-accumulating in the chest or
- infection is developing in the chest or the wound.

These include:

- Increasing shortness of breath
- Increasing chest pain
- Increased temperature or rigors (chills or shivering)
- Pain at insertion site
- Change in colour of the drainage fluid or wound discharge
- Development of odour from the insertion site
- Increased redness or tenderness around the insertion site

These changes may be subtle and present over a few hours to a few days. If you have any of these symptoms please contact your general practitioner or local hospital immediately to be assessed by a medical officer.

If you suddenly become breathless, or have a sudden onset of chest pain call an ambulance