

Image guided thoracentesis

What is it?

A thoracentesis is a procedure in which a pleural effusion (fluid around the lung) is drained through a small puncture in your skin. Oftentimes, a small catheter is temporarily left in place to drain the fluid out of your chest. The procedure will be performed by a doctor (radiologist) using CT or ultrasound guidance.

Before the procedure

Your doctor will explain the procedure to you and answer any questions that you may have about the procedure. Risks include, but are not limited to, the following: bleeding, infection, pain, discomfort/bruising at the procedure site, puncture/damage to adjacent tissue and organs, and collapsed lung. Most complications require only additional observation, although administration of fluid, medications or blood products may be needed. Rarely, chest tube placement and/or surgery could be needed if a life-threatening complication is encountered.

Thoracentesis may be contraindicated in patients with bleeding disorders, severe emphysema or active infection.

You will be asked to sign a consent giving permission to undergo the procedure.

Inform the doctor if you have any drug allergies, a known bleeding disorder or if you take an anticoagulant (blood thinner), aspirin, ibuprofen, or any other medication that may affect blood clotting. In some cases, these medications may need to be temporarily discontinued prior to undergoing this procedure. Additional lab work may be required in order to verify your blood is not too thin.

Do not eat or drink anything after midnight prior to procedure. Please make sure someone is available to drive you home if the procedure is performed on an outpatient basis.

During the procedure

We will attempt to make you as comfortable as possible prior to beginning the procedure. You will normally be sitting up and leaning forward slightly. You may be asked to follow specific breathing instructions during the procedure.

Your skin will be cleaned with an antiseptic solution then draped to create a sterile field. Local anesthetic (e.g. lidocaine) will be used to numb the skin and soft tissue. This may cause a brief stinging sensation.

A needle will be inserted through the numbed area and into the fluid collected around your lung. When appropriate needle position is confirmed, a small catheter on the needle will be advanced into the fluid so that it will drain correctly. You may feel some pressure as catheter is advanced into your chest.

The catheter is usually attached to a bag or small vacuum bottle to collect the fluid as it drains from your chest. Your doctor may ask the radiologist to send some fluid samples for additional testing to determine what is causing the fluid to accumulate in your chest.

After the procedure

You will be monitored closely for at least 1 hour prior to being considered for discharge (if this is done as an outpatient). Your vital signs will be monitored closely during this observation period. Please report any shortness of breath, chest pain, or other symptoms you feel may be related to today's procedure to your nurse. A chest x-ray will be acquired prior to your discharge to make sure that there is no significant lung collapse following the procedure.

The site of the thoracentesis may be sore for several days after the procedure. Take a pain reliever for the soreness as recommended by your regular doctor; acetaminophen (Tylenol) is a good over the counter option. Aspirin and certain other pain relievers could increase the risk of bleeding. Be sure to only take medications approved by your doctor.

Avoid strenuous activity and heavy lifting for 3 days following the procedure.

If you discontinued a blood thinner prior to undergoing this procedure, please contact the doctor who sent you for this study to determine when you can safely resume taking this specific medication.

Notify your doctor or report to the ER if you experience and of the following:

- ❖ Fever and/or chills
- ❖ Redness, swelling, draining, or bleeding at the procedure site
- ❖ Worsening pain at the procedure site or elsewhere
- ❖ Chest pain, shortness of breath and/or difficulty breathing

If you have any questions before and following your procedure call the Radiology nurse at 662-293-1404

Date: _____

(Patient Signature)

(Witness)