

ASCENSION ST VINCENTS

TUNNELED DRAIN PLACEMENT PATIENT HANDOUT

Radiologist who performed your procedure:

Procedure Description:

- An image-guided tunneled catheter (Aspira or Pleurx) placement is performed to allow ongoing drainage of fluid from either the space around the lung (pleural space) or the abdomen (peritoneal space). This procedure is commonly used for recurrent fluid buildup to help relieve symptoms such as shortness of breath, abdominal discomfort, or pressure.
- During the procedure, a radiologist uses imaging (such as ultrasound, fluoroscopy, or CT) to precisely target the fluid. The skin is cleaned with antiseptic, and local anesthetic is used to numb the area. A thin catheter is placed through the skin and tunneled under the skin before entering the pleural or peritoneal space. The tunneled portion helps reduce the risk of infection and keeps the catheter securely in place. The catheter is connected to a drainage system and secured with a dressing. In most cases, fluid is drained at the time of catheter placement.
- The procedure usually takes about 30–60 minutes. You will then be observed for period of time to monitor for any complications.

Benefits:

- Allows ongoing drainage of fluid to help relieve shortness of breath, abdominal discomfort, or pressure.
- Imaging allows the radiologist to precisely place the catheter.
- Provides a minimally invasive way to manage recurrent fluid buildup.
- Can be managed at home in many cases, reducing the need for repeated hospital visits or procedures.
- Uses a tunneled catheter designed to reduce the risk of infection and help keep the catheter securely in place.
- May avoid the need for repeated thoracentesis or paracentesis procedures.
- Most patients tolerate the procedure well and return to normal activities shortly afterward.

Risks & Potential Complications:

- The following list includes some, but not all, possible complications.
- Pain is common but usually mild, typically resolves within a few days, and can be managed with over-the-counter pain medication. Severe pain can occur but is uncommon.
- Minor bleeding is common and usually does not require medical treatment. Any resulting bruising typically resolves on its own over several days. Serious bleeding that requires medical treatment can occur but is uncommon.
- Infection can occur but is uncommon. Most infections are mild and can be treated with antibiotics.
- Injury to nearby organs, bowel, blood vessels, or nerves can occur but is uncommon.

- Risks specific to pleural/chest Aspira placement:
 - Air can leak from the lung into the surrounding space, causing lung collapse (pneumothorax), however this is uncommon. Many mild cases are managed with observation and chest radiographs, while some require temporary placement of a small tube to remove the air and may require hospitalization.
 - Blood collecting in the chest cavity surrounding the lung (hemothorax) can occur but is uncommon and may require additional treatment or hospitalization.
 - Fluid build-up within the lung after re-expansion (re-expansion pulmonary edema) can occur but is rare and may require medical treatment.
- Risks specific to peritoneal/abdominal Aspira placement:
 - Low blood pressure, dizziness, and kidney injury can occur, particularly when large volumes of fluid are removed. Intravenous albumin is usually given to help reduce these risks.
- Feeling faint or lightheaded (a vasovagal reaction) can occur during or after the procedure. This is usually mild and resolves quickly.
- Allergic reactions to the local anesthetic, topical antiseptic or other medications are uncommon.
- Death can occur but is rare.

Alternatives:

- Repeated thoracentesis or paracentesis procedures to drain fluid as needed.
- Medical management alone (such as diuretics or treatment of the underlying condition), depending on the cause of the fluid buildup.
- Surgical procedures or placement of temporary drainage catheters in select cases.
- Some patients choose no further treatment; however, this carries the risk of worsening symptoms, recurrent fluid buildup, or delayed diagnosis and is generally not recommended.

Aftercare:

- One or more bandagers will be applied over the procedure site. Have your nurse change the bandage as needed and anytime it becomes wet. Skin glue may also be applied. Do not pick off the glue—allow it to flake off on its own over several days.
- You may shower and allow water to flow over the site 24 hours after your procedure; however, do not submerge the site in water (bath, pool, hot tub, or ocean) until the drain has been removed and the site has healed.
- Do not apply lotion or ointment to the site until it has healed unless instructed to do so.
- Avoid strenuous physical activity for at least 24 hours after your procedure. Then gradually increase your activity level as tolerated.
- It is normal to experience mild pain and bruising after your procedure. You may take acetaminophen (Tylenol), aspirin, ibuprofen (Motrin), or naproxen (Aleve) for relief. It is safe to take aspirin, ibuprofen, or naproxen soon after your procedure; however, you may experience increased bruising if you do so.
- Contact Radiology, your ordering provider, or your nurse if you have any concerns or experience any of the following: continued bleeding; significant swelling; severe pain not responding to over-the-counter medications; signs of possible infection (significant redness or purulent drainage from the site, severe pain, fever, or chills); shortness of breath and/or chest pain worse than normal for you; dizziness or lightheadedness when standing; a faster-than-normal heart rate; or drainage from around the catheter. Call 911 in the event of an emergency.

- Weekdays 8 am to 5 pm call 308-8401 (Riverside), 296-3886 (Southside), 602-1360 (Clay) or 691-1297 (St Johns). Weekdays 5 pm to 10 pm or weekends 6 am to 10 pm call 308-8401. If outside of these hours, call the hospital operator at 308-7300 and ask to speak to the Interventional Radiologist on call.

How Do I Get Supplies:

- Please contact your ordering provider's office to arrange home health services for help with fluid drainage and to have supplies ordered.