

# Taking care of a drain installed in radiology



In the radiology department, you have had a drain installed to remove liquids from your body. This fact sheet explains how to take care of it in case you have to do it yourself.

## Why was a drain installed?

The drain is there to remove liquid that accumulates in a part of the body in too large a quantity.

## How do I take care of it?

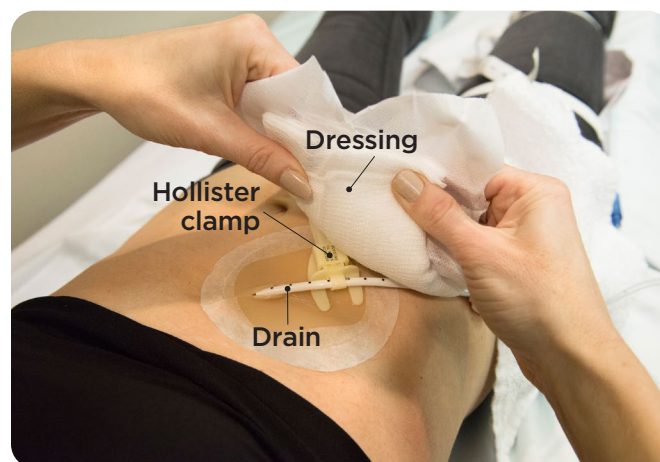
You'll learn to take care of your drain before leaving the hospital or with a CLSC nurse. However, it's the CLSC nurse who should provide you with this care most of the time.

Two things need to be done.

- Change the dressing covering the device that holds the drain in place (Hollister clamp). This is important to avoid the risk of infection where the drain enters your body.
- Clean the drain. This cleaning, called "irrigation", ensures that liquids can flow into the drain and that drainage from the treated area of the body can continue.

## When should I do the care?

You will need to change the dressing AND irrigate the drain every day.



## How much time does it take?

It takes about 20 minutes to change the dressing and irrigate the drain.

## What does the drain look like?



## Are there any contraindications for this care?

No, there are no risks involved. But it is important to follow the steps and respect the rules of sterility.

The dressing must remain dry. Don't take a bath. You can take a shower, but protect the dressing with plastic wrap glued to your skin. It's best to wash yourself with washcloths.

## Is this care painful?

You may experience slight pain in the first few days after your drain is installed. This will go away soon.

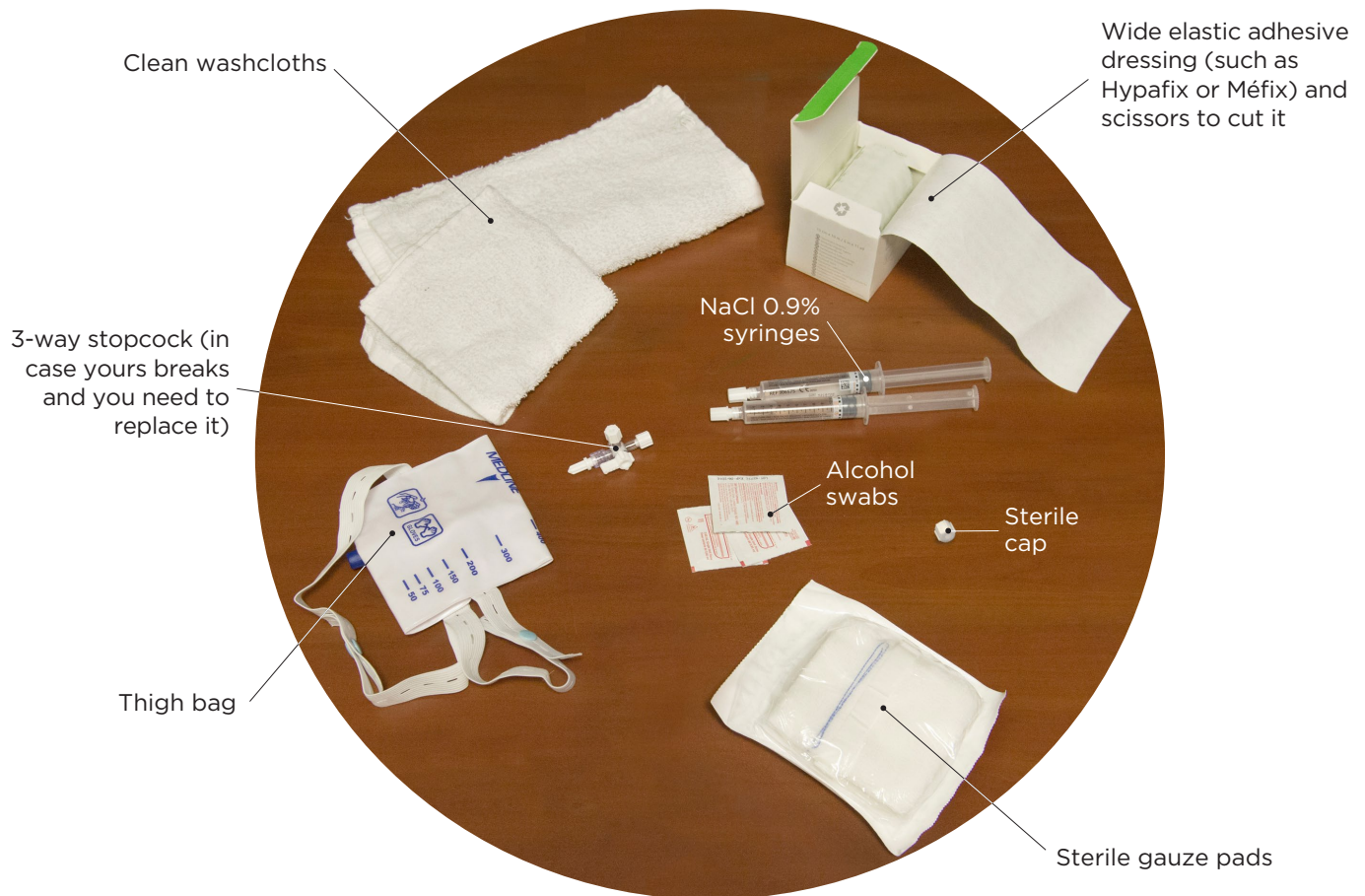
## What type of follow-up will I have?

In Appendix 2 (page 10), you will find the document "*Taking measurements for a drain installed in radiology*". Once a day, you should record in this table how much liquid has drained into the thigh bag.

Bring this document to your next radiology appointment. This will be used to determine whether the drain can be removed. This is usually done when there is no more liquid flowing out. The time frame depends on each person.

## What supplies will I need to care for my drain?

Here is the list of what you will need.



## Where can I get these supplies?

The Radiology Department does not provide them.

Ask the CLSC nurse where you can obtain them.

## How should I do the care?

There are several steps to follow. **Appendix 1 (page 4) of this fact sheet** explains each of these steps.

## Who can I call for help or to ask questions?

You can contact the Radiology Department, Monday to Friday, between 8:00 a.m. and 4:00 p.m.



### USEFUL RESOURCES

Other health sheets published by the CHUM are available. Ask for those that might fit your situation.



You can also find them on our web site [chumontreal.qc.ca/fiches-sante](http://chumontreal.qc.ca/fiches-sante)

*The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.*

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## APPENDIX 1: CARE PROCEDURE

Here are the different care steps. Follow them carefully.

**1**

### PREPARE THE SUPPLIES



- 1 Wash your hands and dry them with a clean towel.



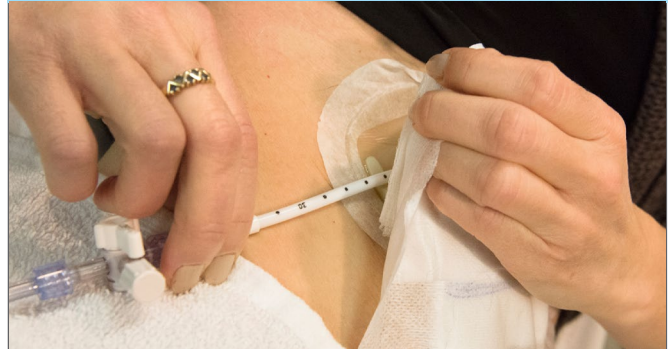
- 2 Using a liquid antiseptic, wash the table where you will place your supplies. Then gather everything you need, as shown on page 3 of this fact sheet.



- 3 Cut two strips of adhesive dressing to prepare for dressing change.

**2**

### REMOVE THE USED DRESSING



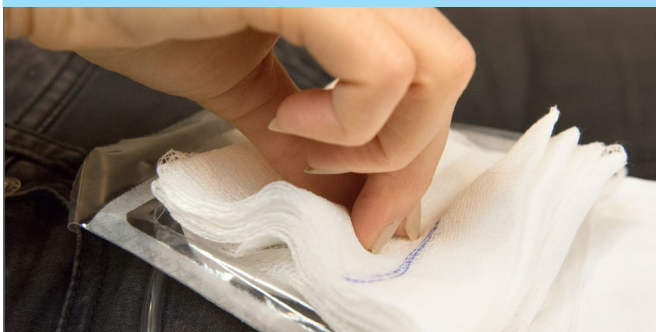
- 1 Hold the drain and start peeling off the dressing on the drain side.



- 2 Continue to carefully remove the dressing one edge at a time.



- 3 Once the last edge has been lifted off, remove the dressing completely. Don't touch the drain pipe with your fingers. If necessary, clean the outside of the clamp with a sterile compress and 70% alcohol.

**3****APPLY THE NEW DRESSING**

- 1** Take a new gauze. Be careful to hold it as shown in the picture so that it remains sterile.



- 2** Place the gauze on the Hollister clamp. Put a second one on, if necessary, so that the entire clamp is covered.



- 3** Open a strip of adhesive dressing and remove the widest backing paper.

**3****(CONTINUED)**

- 4** Stick the adhesive dressing over the gauze. There should be a rim of at least 2 cm extending beyond the gauze.



- 5** Remove the remaining backing paper.



- 6** Stick the dressing securely to the skin.



- 7** Apply the second adhesive bandage strip. It must cover part of the first bandage.



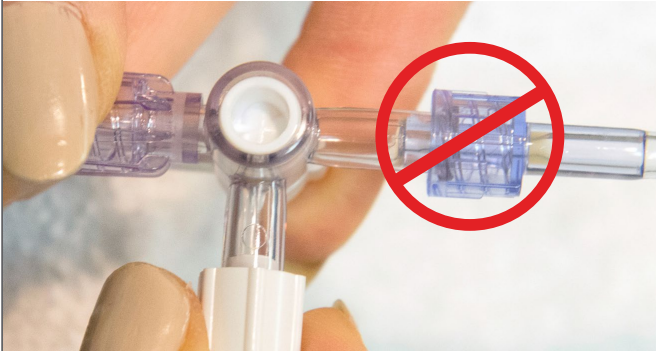
# 4

## PREPARE THE IRRIGATION



### ATTENTION

Take the following precautions:



- Don't unscrew the tube or the stopcock during the irrigation.



- Never irrigate from the drain. The tip of the drain is very fragile and could break.



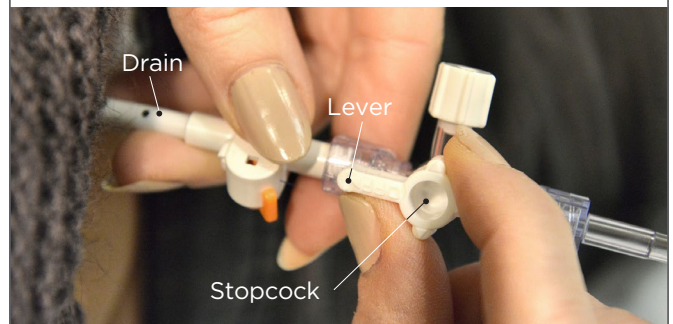
- Always irrigate from the access nozzle.

# 4

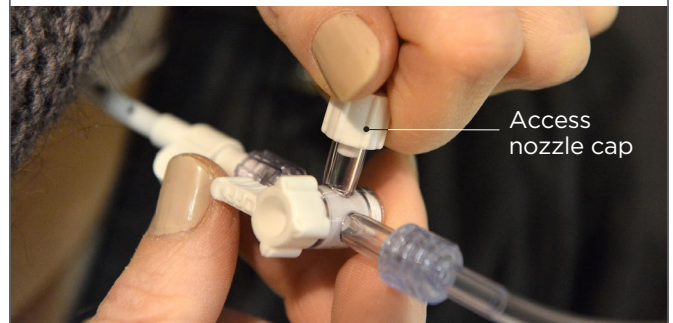
## (CONTINUED)



- 1 Place a clean washcloth under the stopcock.



- 2 Position the stopcock as in the photo, with the small lever facing you.



- 3 Unscrew and discard the cap from the access nozzle.

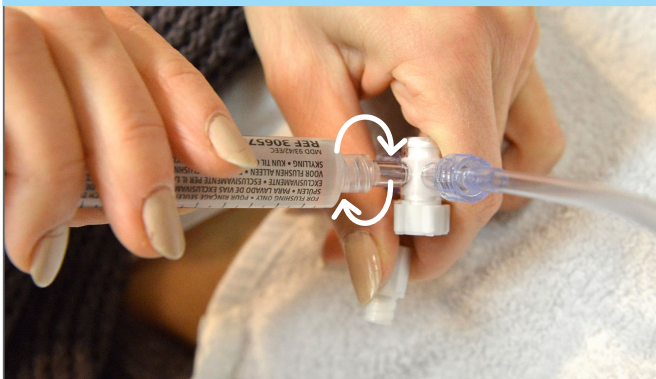


- 4 With an alcohol swab, disinfect the access nozzle and let it dry for 30 seconds.



## 5

### IRRIGATE



- 1 Take an NaCl 0.9% syringe, remove its cap, and screw it onto the access nozzle.



- 2 Put the stopcock in this position so that the NaCl can flow into the drain, with the small lever facing the thigh bag.



- 3 Inject the NaCl. Stop immediately if you feel resistance. **Never push hard to inject the NaCl.**  
Depending on your prescription, you may have to use more than one syringe. If so, use this same procedure for the following ones.

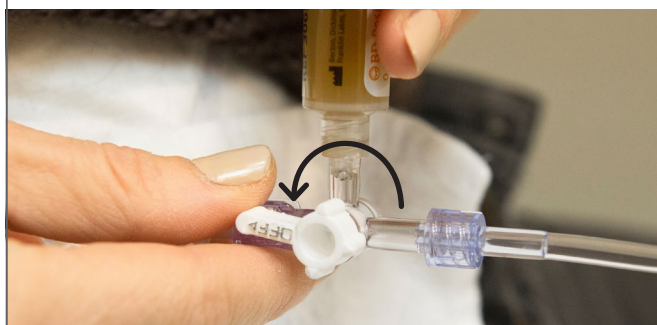
Some liquid might flow around the drain during irrigation. This is normal because the cavity in which the drain is located is gradually closing and contains less and less liquid.

## 6

### FINISH THE IRRIGATION



- 1 Pull the piston out of the syringe to aspirate the NaCl you have just injected.



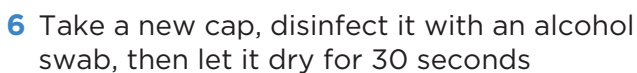
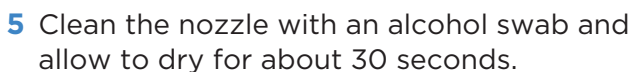
- 2 Put the stopcock in this position, with the small lever facing you.



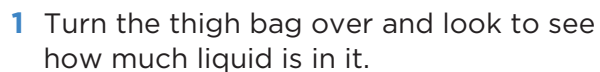
- 3 Inject the liquid. It will flow into the thigh bag. If you have used more than one NaCl syringe, return the stopcock to the other position and repeat points 1 to 3 of this step several times.



6



7



2 Record the quantities injected and drained in the table in Appendix 2. The amount of NaCl injected is sometimes greater than the amount removed because some of it might remain inside the body.



8

## EMPTY THE THIGH BAG



- 1 Turn the bag over so that the drain plug is facing upwards.



- 2 Unscrew the drain plug (no need to remove it completely).

8

## (CONTINUED)



- 3 Empty the contents of the bag into a toilet or sink.



- 4 Close the drain plug and put the thigh bag back in place.

This completes the care of your drain.

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In the table on the following page, record the measurements taken while caring for your drain.



### Important

- Use one table per drain.
- Start a new table if the reason for the drain changes.
- Tip: print 1 or 2 blank tables before starting!

Drain site: .....

Reason for the drain: .....

☐ **With irrigation (I):** inject ..... ml NaCl

with emptying (E) of liquid: ☐ Yes ☐ No

Irrigation frequency:

- ☐ Once per day
- ☐ Twice per day
- ☐ 3 times per day
- ☐ After meals

☐ **Without irrigation** (record only the amounts removed from the drain bag in the column “Emptying”)

☐ **(I/E) Measurements every 8 hours**



**Record the amounts in millilitres (ml).**

[illegible]

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Date / Time	Pain (level))	Activity, medication, etc...	Comments (effects on pain, etc.)
12-05, 9 p.m.	7	2 Tylenols	A bit better. Pain = 5/10
12-05, 9:30 p.m.	5	Relaxation - reading	Feeling better. Pain = 3/10

You want to keep your pain level at **4** or lower.  
Unrelieved pain will be harder to control.



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