

# Intercostal Chest Drain Check and Report

Name:.....

DoB:.....

Hospital number:.....

(please affix patient label and confirm identity)

## Pre procedure Checklist (Sign in)

Name:\_\_\_\_\_ Role:\_\_\_\_\_

Have all team members introduced themselves and role: Y N

Allergies:..... None

Indication for drain: Air Fluid Both

Radiology reviewed: CT CXR

Confirm side of procedure: Left Right

Pre procedure observations:

BP:\_\_\_\_\_ SpO2:\_\_\_\_\_ FiO2:\_\_\_\_\_ HR:\_\_\_\_\_

Patient's coagulation and medication checked:

Yes No Platelets\_\_\_\_\_ PT \_\_\_\_\_

Consent: Written Verbal Part IV

Thoracic US for Fluid done: Y N N/A

Thoracic US findings: Echoic anechoic

Effusion depth (cm):\_\_\_\_\_

Other US findings:\_\_\_\_\_

Realtime US Immediate US marking

## Procedure Checklist and Report

Aseptic technique: Gown Gloves

At least two applications of chloroprep

Sterile field protected by drapes: Yes No

### STOP if no Air or Fluid aspirated with local anaesthetic infiltration

Side: Left Right Site:\_\_\_\_\_

Lignocaine 1% 2% \_\_\_\_\_ (mls)

Insertion technique: blunt dissection sledinger

Fluid appearance:\_\_\_\_\_ N/A

Amount drained initially: \_\_\_\_\_ (mls)

Drain Size:\_\_\_\_\_ (Fr)

Depth of drain at skin:\_\_\_\_\_ (cm)

Secured: Suture Dressing

Closing mattress (>size 18) placed Y N

Complications:\_\_\_\_\_

Guidewire removed: Y N N/A

Drain Swinging? Y N

Drain bubbling? Y N

## Post-Procedure Checklist (Sign Out)

Order Post procedure CXR and handover for review: Y N

Start Chest Drain Chart Y N/A

Prescribe analgesia Y N/A

Information leaflet on chest drain care given to patient and explained: Y N N/A (patient unconscious)

Ensure specimens correctly labelled: Y N N/A

Post procedure observations:

BP:\_\_\_\_\_ SpO2:\_\_\_\_\_ FiO2:\_\_\_\_\_ HR:\_\_\_\_\_

Have drain flushes been prescribed (20ml Normal Saline QDS for seldinger drains inserted for fluid)? Y N N/A

Confirm instructions on fluid drainage to nursing staff: Y N

- Stop drainage by closing tap if patient develops pain, coughing, breathlessness or once 1500mls drained

- Reopen after 1 hour

Confirm frequency of observations: every 15 mins for 1 hour then hourly for 2 hours then 4 hourly.

Have all items of stock running low (< 3 remaining) been ordered urgently: Y N N/A

Are there any procedural problems that need follow-up: Y N

Primary operator: \_\_\_\_\_ Grade:\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Supervised: Y N Assistant Y N

Name:\_\_\_\_\_ Grade \_\_\_\_\_ Signature: \_\_\_\_\_