

## Chest Drain Proforma

Patient name:

DOB:

CHI:

Location:

### Indication:

Pneumothorax     Haemothorax     Other

### Informed consent:

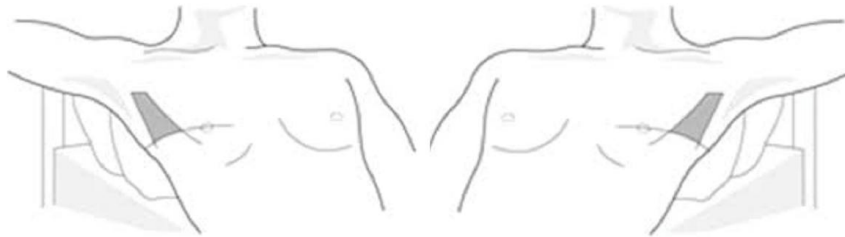
- includes possible complications (eg. bleeding, infection, etc)

Yes (verbal/written)     No \_\_\_\_\_

### Patient position:

Erect     Semi-erect     Supine (caution)     Arm over head

Side confirmed clinically AND     Side confirmed on CXR



Triangle of safety - lateral border pectoralis major, mid-axillary line,  
level of nipple (4<sup>th</sup>/5<sup>th</sup> intercostal space)

IV access     ECG     NIBP     SaO2     Supplemental O2  
 Full barrier precautions & sterile technique

Side:  Right     Left

Site:

Subcut lignocaine: \_\_\_% \_\_\_ mls

Technique:  Seldinger     Open (ie. blunt dissection - do NOT use a trocar)

Chest drain size: \_\_\_ F

### Complications:

No     Yes \_\_\_\_\_

### Post procedure check:

- CXR confirms satisfactory drain position
- Sutures, tubing, connections secure
- Chest drain chart started
- Advise patient/staff not to tug drain or elevate above insertion level
- Advise no more than 500ml to be drained in first hour (if pleural effusion)
- Prophylactic antibiotics (if chest drain for traumatic injury)

Doctor:

Date:

### Supervised?

No     Yes \_\_\_\_\_