

Care Gram

Thoracentesis

What Is a Thoracentesis?

Sometimes patients may get excess fluid that collects in the pleural space (the space between the lung and the chest wall). A thoracentesis is a procedure to drain the extra fluid from the space. The thoracentesis is usually performed in the Radiology Department using ultrasound. The use of ultrasound for this procedure reduces the risk of injury to the organs of the chest. The risks of thoracentesis include bleeding, infection, and pneumothorax (collapsed lung). It is important to remind your doctor if you take any blood-thinning medicine. If you have any questions, please call the Radiology Department at (220) 564-4710.

Allowing Time

The procedure can take from 1 to 2 hours depending on the amount of fluid that needs to be removed.

Registration

If you are a patient in the Hospital, the procedure may be done in your room or in the Radiology Department. Location will depend on your condition.

If you are coming to the Hospital for this procedure, go directly to the Registration area on the LMH First Floor. We ask that you arrive 30 minutes before your scheduled test time to register.

Before the Test

- Do not eat or drink anything the day of the exam.
- Tell your doctor if you have any allergies, especially to anesthesia.
- Check with your doctor if you are taking any blood-thinning drugs to see if these medicines can be stopped. Some medicines may need to be stopped for 3-7 days prior to your test. Blood-thinning medicines include:
 - Aspirin or aspirin-type products
 - Ibuprofen (Advil, Motrin)
 - Naproxen (Aleve)
 - Heparin
 - Coumadin
 - Warfarin
 - Effient (prasogrel)
 - NSAID (Bufferin, Celebrex, Indocin)
 - Pletal (cilostazol)
 - Eliquis (apixaban)
 - Aggrenox (aspirin & dipyridamole)
 - Xarelto (rivaroxaban)
 - Pradaxa (dabigatran)
 - Brilinta (ticagrelor)
 - Persantine (dipyridamole)
 - Plavix (clopidigrel)
 - Lovenox and other low-molecular-weight heparins (arixtra, fragmin, innohep)
 - Certain herbal medicines/supplements, such as St John's Wort
 - Fish oil



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1616-0563
02/10/2021
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During a Thoracentesis

- A registered nurse will monitor your heart, blood pressure and oxygen level before, during, and after your procedure
- Either you or your medical power of attorney will need to sign a consent form
- You will be placed in an upright position with the arms and shoulders raised and supported on a paddle table – this position spreads the ribs and enlarges the space between the ribs allowing more space for the insertion of the needle
- The ultrasound will be used to scan the back of the chest and the doctor will choose the best area from which to drain the fluid
- A very small needle will be used to inject numbing medicine into the back of the chest
- A needle or plastic catheter then will be inserted into the back of the chest
- The fluid will be drained into the syringes and/or glass bottles
 - The fluid may be sent to the Lab for testing – this may help detect why the fluid is there and the best way to treat you
- When the fluid is removed, the needle or catheter will be taken out and a sterile dressing will be applied to the site
- You will need to be monitored for an additional 30 to 60 minutes after the needle or catheter is removed
 - During this time, you will have a chest X-ray taken to check for a collapsed lung
- You may need to have blood drawn after a thoracentesis

After the Test

You may return to your normal routine. After 24 hours you may shower. Clean the site by using a clean washcloth with soap and water. Keep the site covered with a bandage until it is completely healed. Do not apply ointments or creams to the site.

Call the doctor if the site becomes red, swollen, warm to touch, has thick drainage, or if you develop a fever.

Call 911 for severe chest pain or shortness of breath.

Finding Out the Results

If the fluid was sent to the Lab for testing, the results will be sent to your doctor in a few days. Please call your doctor's office to get the results.