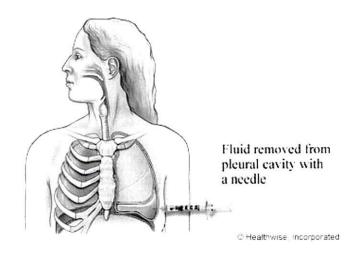
## **Thoracentesis: Before Your Procedure**

### What is thoracentesis?



Thoracentesis (say "thor-uh-sen-TEE-sis") is a procedure to remove fluid from the space between the lungs and the chest wall. This is called the pleural space. The procedure may also be called a "chest tap."

It is normal to have a small amount of fluid in the pleural space. But too much fluid can build up because of problems such as infection, heart failure, and lung cancer. The procedure may be done to help with shortness of breath and pain caused by the fluid buildup. Or you may have it done so the doctor can test the fluid to find the cause of the buildup.

Your doctor will put a long, thin needle or a thin plastic tube, called a catheter, between two of your ribs. The doctor will use the needle or catheter to take fluid out.

You may get medicine before the procedure. This helps with pain and helps you relax. The procedure will take about 15 minutes. Most people go home shortly after. You can go back to work or your normal activities as soon as you feel up to it.

If the doctor sends the fluid to a lab for testing, it usually takes a few hours to get the results. Some of the test results may take a few days. The doctor or nurse will discuss the results with you.

**Follow-up care is a key part of your treatment and safety.** Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

# What happens before the procedure?

Procedures can be stressful. This information will help you understand what you can expect. And it will help you safely prepare for your procedure.

### Preparing for the procedure

- Understand exactly what procedure is planned, along with the risks, benefits, and other options.
- Tell your doctors ALL the medicines, vitamins, supplements, and herbal remedies you take. Some of these can increase the risk of bleeding or interact with anesthesia.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix), or aspirin, be sure to talk to your doctor. He or she will tell you if you should stop taking these medicines before your procedure. Make sure that you understand exactly what your doctor wants you to do.
- Your doctor will tell you which medicines to take or stop before your procedure. You may need to stop taking certain medicines a week or more before your procedure. So talk to your doctor as soon as you can.
- If you have an advance directive, let your doctor know. It may include a living will and a
  durable power of attorney for health care. Bring a copy to the hospital. If you don't have
  one, you may want to prepare one. It lets your doctor and loved ones know your health
  care wishes. Doctors advise that everyone prepare these papers before any type of
  surgery or procedure.

## What happens on the day of the procedure?

· Take off all jewelry and piercings.

### At the hospital, surgery center, or doctor's office

- · Bring a picture ID.
- The doctor may take a chest X-ray or use ultrasound or CT scan pictures to help find the exact spot where fluid has built up.
- The doctor will give you a shot of numbing medicine in the skin where the needle or catheter will go.
- The procedure will take about 15 minutes.
- The doctor may take a chest X-ray after the procedure.

## **Going home**

- · You may need someone to drive you home.
- You will be given more specific instructions about recovering from your procedure.

## When should you call your doctor?

- · You have questions or concerns.
- You don't understand how to prepare for your procedure.
- You become ill before the procedure (such as fever, flu, or a cold).
- You need to reschedule or have changed your mind about having the procedure.

# Where can you learn more?

Go to http://www.healthwise.net/ed
Enter U836 in the search box to learn more about "Thoracentesis: Before
Your Procedure."

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## Thoracentesis: What to Expect at Home

### **Your Recovery**

Thoracentesis (say "thor-uh-sen-TEE-sis") is a procedure to remove fluid from the space between the lungs and the chest wall (pleural space). This procedure may also be called a "chest tap." It is normal to have a small amount of fluid in the pleural space. But too much fluid can build up because of problems such as infection, heart failure, or lung cancer. The procedure may have been done to help with shortness of breath and pain caused by the fluid buildup. Or you may have had this procedure so the doctor could test the fluid to find the cause of the buildup.

Your chest may be sore where the doctor put the needle or catheter into your skin (the puncture site). This usually gets better after a day or two. You can go back to work or your normal activities as soon as you feel up to it.

If the doctor sent the fluid to a lab for testing, it may take several days to get the results. The doctor or nurse will discuss the results with you.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to feel better as quickly as possible.

## How can you care for yourself at home?

### **Activity**

- Rest when you feel tired. Getting enough sleep will help you recover.
- Avoid strenuous activities, such as bicycle riding, jogging, weight lifting, or aerobic exercise, until your doctor says it is okay.
- You may shower. Do not take a bath until the puncture site has healed, or until your doctor tells you it is okay.
- Ask your doctor when you can drive again.
- You may need to take 1 or 2 days off from work. It depends on the type of work you do and how you feel.

#### Diet

- · You can eat your normal diet.
- Drink plenty of fluids (unless your doctor tells you not to).

#### Medicines

- Your doctor will tell you if and when you can restart your medicines. He or she will also give you instructions about taking any new medicines.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix), or aspirin, be sure to talk to your doctor. He or she will tell you if and when to start taking those

medicines again. Make sure that you understand exactly what your doctor wants you to do.

- Be safe with medicines. Take pain medicines exactly as directed.
  - If the doctor gave you a prescription medicine for pain, take it as prescribed.
  - If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.
  - Do not take two or more pain medicines at the same time unless the doctor told you to. Many pain medicines have acetaminophen, which is Tylenol. Too much acetaminophen (Tylenol) can be harmful.
- If you think your pain medicine is making you sick to your stomach:
  - Take your medicine after meals (unless your doctor has told you not to).
  - Ask your doctor for a different pain medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.

### Care of the puncture site

- Wash the area daily with warm, soapy water, and pat it dry. Don't use hydrogen peroxide or alcohol, which may delay healing. You may cover the area with a gauze bandage if it weeps or rubs against clothing. Change the bandage every day.
- Keep the area clean and dry.

**Follow-up care is a key part of your treatment and safety.** Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

## When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- · You have severe trouble breathing.
- · You have sudden chest pain and shortness of breath, or you cough up blood.

### Call your doctor now or seek immediate medical care if:

- You have shortness of breath that is new or getting worse.
- You have new or worse pain in your chest, especially when you take a deep breath.
- · You are sick to your stomach or cannot keep fluids down.
- You have a fever over 100°F.
- Bright red blood has soaked through the bandage over your puncture site.
- · You have signs of infection, such as:
  - Increased pain, swelling, warmth, or redness.
  - Red streaks leading from the puncture site.
  - Pus draining from the puncture site.
  - Swollen lymph nodes in your neck, armpits, or groin.
  - · A fever.

• You cough up a lot more mucus than normal, or your mucus changes color.

Watch closely for changes in your health, and be sure to contact your doctor if you have any problems.

# Where can you learn more?

Go to http://www.healthwise.net/ed
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to Expect at Home."

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