

CVICU Huddle Week of December 15, 2008

Chest Tubes and Atrium Drainage System

Quiz yourself – True or False?

1. The water in the suction control chamber should be bubbling vigorously.

False – Vigorous bubbling causes quicker evaporation and produces excessive noise. Constant, gentle bubbling is all that is required to impose the prescribed amount of suction. The suction control stopcock, located on the suction tubing, can be used to adjust bubbling. The suction source regulator can also be adjusted to turn suction control bubbling up or down.

2. Once the chest tube drainage system has been set up, there is no need to check the water levels.

False – Fluid levels should be checked each shift as fluid may evaporate.

The following should also be assessed and documented (LPCH Patient Care Procedure: Chest Tube Management):

1. Presence of air leaks
2. Fluctuation of water seal chamber
3. Amount of suction
4. Amount and type of drainage
5. Presence of crepitus (subcutaneous emphysema)
6. Breath sounds
7. Patient comfort level
8. Appearance of insertion site/dressing
9. Documentation is at a minimum every 8 hours

3. The chest tube is ordered to water seal. I should turn off the suction control stopcock.

False – It is not necessary to turn off the stopcock, clamp, or cap the suction line during gravity drainage or patient transport. Both the water seal and the positive pressure valve provide maximum patient protection when either the suction line or stopcock remain open or closed.

4. As long as the patient tubing is clamped to the bed, the patient is protected from having the tube dislodged.

False – Please protect your patient by making sure the chest tube is secured to the patient. In addition to an intact dressing over the insertion site, there should be tape anchoring the chest tube distal to the insertion site. If you also anchor the tubing to the bed, make sure it is anchored to the linens that move with the patient.

5. I should change the chest tube insertion site dressing daily.

False – Chest tube dressings are changed every 48 hours or whenever soiled. If possible, isolate the chest tube dressings from the surgical dressing.

- LABEL:**
1. Suction Control Chamber
 2. Water Seal Chamber
 3. Collection Chamber
 4. Tubing to Patient
 5. Tubing to Suction

