

**Nursing Policy Statements:** (designates what MUST be done)

1. The RN assesses respiratory status and vital signs of patients with a chest tube minimally every 4 hours or more frequently per LIP orders or as indicated by patient condition.
2. The RN notifies the licensed independent provider (LIP) immediately if the patient develops cyanosis, absent breath sounds, decreased oxygen saturation, rapid or shallow breathing, subcutaneous emphysema, chest pain, or excessive bleeding.
3. The RN notifies the LIP if chest tube output increase  $>1\text{ml/kg/hour}$  or a substantial increase in bright red drainage greater than  $100\text{ml/hour}$  for two consecutive hours.
4. The RN instructs the patient to report any breathing difficulty immediately.
5. The RN DOES NOT access a chest tube for flushing or medication administration; only an LIP can access a chest tube for flushing/medication administration.
6. The RN ensures the collection apparatus is below the level of the chest.
7. The RN DOES NOT milk, strip, or clamp a chest tube (except as ordered by LIP for TCV Surgery patients ONLY).
8. The RN maintains an occlusive dressing around chest tube at all times.
9. The RN changes the dressing every 48 hours and/or anytime the dressing is loose or soiled.
10. The RN assesses the character, consistency, color, and amount of drainage in the drainage collection chamber.
11. The RN assesses the integrity of the drainage tubing, chest tube, and collection apparatus at minimum every 4 hours and with a change in the patient's condition.
12. The RN documents a chest tube in the Electronic Medical Record (EMR) as an LDA (Line/Drain/Airways/Wounds) and records drainage on the Intake and Output flowsheet.

**Manufacturer's Instructions:**

- [Atrium Medical Corporation](#)
  - Additional tools for professional education from Atrium: [Atrium University](#)
- [Atrium Pneumostat MAQUET](#)
- [Atrium Express Mini 500](#)
  - Additional tools for professional education from Atrium: [Atrium Express Mini 500](#)
- [Pleur-evac Pneumonectomy Unit](#)
- [PleurX for Pleural Effusions](#)
  - Additional tools for professional education from BD: [PleurX Patient Education for Discharge](#)
- [Bard Aspira for Pleural Effusions Safety Info](#)
  - Additional tools for professional education from Bard: [Aspira Quick Reference Guide](#)
  - Additional tools for professional education from Bard: [Aspira Patient Guide](#)

**Interprofessional Policies** (designates what MUST be done)

- [Emergency Department C4](#): Chest Tube Placement
- [Nursing Policy A20](#): Floating Tool Kit (TCVICU & TIMU float RN limits re: chest tubes)

**Interprofessional Guidelines** (provides RECOMMENDATIONS)

- Children's Hospital [1.1.03--Chest Tube Management in the Pediatric Postoperative Cardiovascular Patient](#)

## Standard Work (best known how-to steps to optimize outcomes, minimize waste and variation)

- [Antiseptic Choice for Venipuncture and Arterial Puncture in the Neonate](#) (includes chest tube placement)

## Procedures (how-to steps):

| <b>Lippincott ADULT</b><br><i>(or Adult &amp; Pediatric combined)</i>   | <b>Lippincott PEDIATRIC</b>   | <b>AACN Manual<br/>CRITICAL CARE</b>   |
|---|---|--|
| <a href="#">Inserting a chest tube</a><br><a href="#">Chest tube drainage system setup</a><br><a href="#">Chest tube drainage system monitoring and care</a><br><a href="#">Chest tube dressing change, adult</a><br><a href="#">Chest tube removal, assisting</a><br><a href="#">Pleural catheter for recurrent effusion management and care (Aspira)</a><br><a href="#">Thoracentesis</a><br><a href="#">Intake and output assessment</a> | <a href="#">Chest tube insertion, assisting, pediatric</a><br><a href="#">Chest tube drainage system collection device setup, child</a><br><a href="#">Chest tube drainage system monitoring and care pediatric</a><br><a href="#">Chest tube dressing change, pediatric</a><br><a href="#">Chest tube removal, child</a><br><a href="#">High frequency ventilator use, pediatric</a> | <a href="#">21 : Chest Tube Placement (Assist)</a><br><a href="#">23 : Chest Tube Removal (Assist)</a><br><a href="#">24 : Closed Chest Drainage System</a><br><a href="#">27 : Thoracentesis (Assist)</a> |

| <b>Primary Contact:</b> | <b>Version information:</b>   | <b>Date &amp; Approval Body:</b>  |
|-------------------------|-------------------------------|---|
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