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INFORMATION FOR PATIENTS

Pleural aspiration

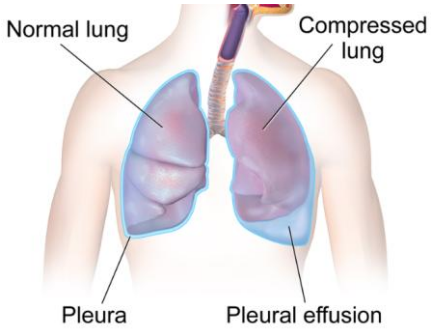
What is a pleural aspiration?

A pleural aspiration is a procedure to remove fluid or air from the space between the lungs and the chest wall. This space is called the pleural space or cavity.

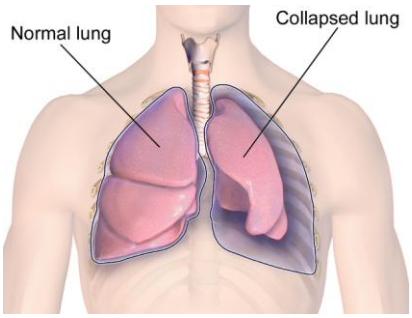
Why do I need a pleural aspiration?

This procedure has been recommended to you by your doctor because fluid or air has collected in your pleural space. This is called a pleural effusion (fluid) or a pneumothorax (air). This can stop your lungs working properly and cause breathlessness.

Pleural effusion (fluid)

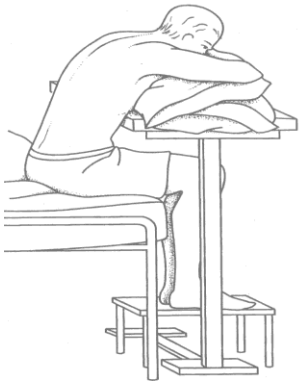


Pneumothorax (air)



How is a pleural aspiration done?

If you are able, you will be positioned in a sitting position leaning forward slightly, resting your arms on a table. We can find an alternative position if this is difficult for you.



We will perform an ultrasound scan of your chest to assess the fluid/air around your lung and to help find a safe site for the procedure. A small amount of jelly will be placed on a scanner probe and pressed gently onto your skin. This is a safe procedure and is not painful.

A diagnostic aspiration involves cleaning the skin with alcohol solution to kill any bacteria. The fluid often feels cold but isn't painful. A needle is pushed through the skin into the pleural space and a small amount of fluid is withdrawn using a syringe.

A therapeutic aspiration involves cleaning the skin with alcohol solution to kill any bacteria.

The fluid often feels cold but isn't painful. An anaesthetic is then injected into the skin to numb the area. When the area is numb a small cut is made to the skin and a special needle with a plastic chest tube is passed through the cut and into the pleural space and connected to a drainage bag to allow fluid or air to be removed.

What are the advantages?

A diagnostic aspiration allows a small amount of fluid (20-50mls) to be sent for tests to help find the cause of the effusion.

A therapeutic aspiration allows fluid to be sent for tests and allows a larger amount of fluid/air (up to 1500mls) to be removed to help improve your breathlessness.

What are the risks?

Pleural aspiration is considered a very safe procedure with a few risks. The risks will be explained in more depth when asking you to sign the consent form. The more common risks include:

- **Pain.** Sometimes the anaesthetic can sting, and you may feel a sharp sensation as the needle enters the pleural space. This will last less than one minute, and most people do not find the procedure very painful.

- **Infection.** The procedure is performed in a sterile manner to minimise the risk of infection.

- **Bleeding.** The risk of serious bleeding is very low. We minimise this risk through checking your bloods and asking you to stop certain medications before the test. We also use ultrasound guidance to locate a safe site for the procedure.

- **Lung/organ puncture.** There is a very small risk of injury to your internal organs. This risk is reduced by using ultrasound guidance to locate a safe site for the procedure.

Is there anything I need to do before the procedure?

Please let your doctor, specialist nurse or the Medical Day Case staff know if you have diabetes or are taking any medication that thins your blood:

- Warfarin, Clopidogrel and Prasugrel will need to be discontinued for five days before the procedure.

- Ticagrelor will need to be stopped for seven days before the procedure.

- Rivaroxaban, Apixaban or Edoxaban tablets will need to be discontinued for 48 hours before the procedure.

- Enoxaparin or Fondaparinux injections will need to be discontinued for 24 hours before the procedure.

Your doctor, specialist nurse or the Medical Day Case staff will advise you when to restart these following your procedure.

What will happen after the procedure?

You will be taken to a recovery area where the Medical Day Case team will take your observations and offer you a drink and something to eat.

A small sterile dressing will be applied to your skin after the procedure. This can be removed after 24 hours.

You do not need to be escorted home and most people feel well enough to return to their usual activities within 24 hours.

An outpatient appointment will be arranged for you after your procedure. At this appointment the doctor will discuss the results with you.

Contact details

If you would like any further information about the procedure, or if any problems arise, you should telephone the specialist nurses at the hospital on 01623 622515 extension 4726 / 3896 / 3332.

Feedback

Your feedback is encouraged. We are keen to make this procedure (pleural aspiration) as straightforward and comfortable as possible.

Please feel free to make any suggestions for improvements to your doctor, specialist nurses or the Medical Day Case team.

Further sources of information

NHS Choices: www.nhs.uk/conditions
Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)
PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222
Newark Hospital: 01636 685692
Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet (if relevant) please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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