

DRAIN CARE INSTRUCTIONS AND LOG

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Drain care is required 3 times per day immediately following surgery. Follow these instructions explicitly and record drainage as required, below. **You must do this 3 times per day, and at any time the drainage container is more than 1/3 full.** You will submit the drain log to Dr. Miles for your patient record.

1. Wash your hands well with anti-bacterial soap.
2. Open cap on the drain bulb. Record the amount of fluid based on the markings on the bulb. If the bulb does not have markings or you cannot read them, pour out drainage into a clean measuring cup. Record the amount of drainage and time of day as indicated. Dispose of drainage in the toilet and flush.
3. **Squeeze bulbs tight.** Replace cap.

Once you have measured your fluid drainage, you must **“milk” or “strip” the drain tubing.** This is done to prevent small clots from blocking fluid flow.

4. To do this, hold the tubing securely at the skin entrance site with one hand. This is important to avoid inadvertently removing the drain or pulling on the suture holding it in place. With the other hand, pinch the tubing between your thumb and index finger and, using a small alcohol pad to reduce friction, apply firm pressure as you strip the tubing away from the patient and towards the bulb.
5. If the tubing and bulb come apart, wipe the ends with alcohol and reconnect. Squeeze the bulb again and replace cap.

Cleansing the Drain Site

Once per day or as instructed, change gauze around drain sites. Change the gauze more often if it becomes saturated.

Check the skin around the drains for leakage or redness (a slight redness surrounding the tube is not unusual). If there is leakage, begin milking the tubes downward towards the bulb and continue milking every hour until leakage slows down. The tube could possibly be obstructed. Apply a small amount of Vaseline around the drain insertion site. Attach the drainage bulb to your clothes so that there is no tension on the insertion site.

Showering: Never submerge drain sites under water in a tub or pool. Dr. Miles may give you permission to shower without direct water pressure or water flow over the drain sites. A small amount of splashing is OK. Assistance is often required to manage and secure the drains while showering. It is also acceptable to sit in a shallow filled tub as long as the drain skin sites are not submerged (i.e. breast drains). The upper body can be sponge bathed in this setting.

Additional Instructions

- Always secure the drain to your clothing so that there is no tension on the drain at the incision site.
- Do not cut the drains.
- Keep tubes connected to the bulbs.
- Check that the bulb is always deflated (or flat).

Notify Dr. Miles immediately if any of the following occur:

- A large amount of leakage around the drain.
- A marked increase in drainage output (double the usual flow).
- Increased heat, redness, or tenderness around the insertion site.

Drainage Log

DAY/DATE	TIME	AMOUNT DRAINED	
		LEFT (cc)	RIGHT (cc)
DAILY TOTAL (1)		Total:	Total:
DAILY TOTAL (2)		Total:	Total:
DAILY TOTAL (3)		Total:	Total:
DAILY TOTAL (4)		Total:	Total:
DAILY TOTAL (5)		Total:	Total:
DAILY TOTAL (6)		Total:	Total:
DAILY TOTAL (7)		Total:	Total:
DAILY TOTAL (8)		Total:	Total:
DAILY TOTAL (9)		Total:	Total:
DAILY TOTAL (10)		Total:	Total:

Please Note ML or CC's, NOT OZ., We are looking for total number of CC's in 24 hours.