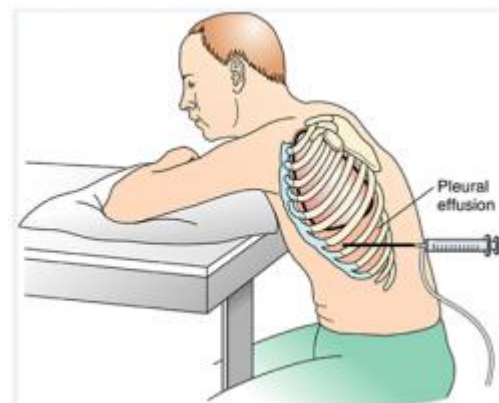


**“PLEURAL TAPPING /
THORACOCENTESIS IS A
PROCEDURE TO REMOVE FLUID
FROM CHEST FOR DIAGNOSTIC
AND THERAPEUTIC PURPOSE. IT IS
USUALLY A DAY CARE PROCEDURE
WITH MILD TO MODERATE
DISCOMFORT.”**

What is Pleural Tapping / Thoracocentesis?

BREATHE FIT LIVE FIT



CHEST CARE CLINIC, KHARGHAR

**Dr. VISHAL GUPTA- CHEST SPECIALIST
Dr. DEEPIKA UGHAD GUPTA- CHEST SPECIALIST
TIMINGS: 10AM TO 1PM AND 5PM TO 10PM**

**Shop No. 1, Shreeji enclave, plot 18, sector 13,
Kharghar.**

**Inquiries and Appt. 9869357905
chestcareclinickharghar@gmail.com
<https://goo.gl/maps/KbphpSWodVx>**

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Pleural tapping also called Thoracocentesis / pleurocentesis is a procedure needing removal of fluid from the chest for diagnostic and therapeutic purposes. There is usually fluid / air in the space called as the pleural space due to disease like pneumothorax, infections and cancers. It is important to evaluate the cause of such diseases and the need to send diagnostic tests to differentiate causes in every individual case to know for decisions in the future care of the patient. The procedure must be undertaken in a hospital setting as a day care procedure. Some exceptions are made as per the treating physician's requirement. Pre testing with routine blood reports, XRay Chest and the Chest Ultrasound is needed. Sometimes if the fluid is relatively little, it may be needed to remove the fluid under real time ultrasound guidance.

Why do I need Pleural Tapping?

Most commonly Pleural tapping done to evaluate:

1. Infections (Tuberculosis / Pneumonias).
2. Pneumothorax (Air in the pleural space).
3. Cancers including lung cancer can have pleural fluid needed for diagnosis.
4. Pleural fluid of unknown causes in selected cases.

Where is it done?

It is a day care admission procedure usually. The concerned patient will be admitted for the procedure and kept for atleast 2-3 hours after the procedure. Once the patient is relatively well he /she is asked to go home with an attending relative. In critically ill patients it may be done in the ICU.

What am I to expect after /during pleural tapping?

1. Pain: The Pleural tapping is done under local anaesthesia. This makes it minimally painful. There will pain medications prescribed to manage the pain at the time of discharge. However, if at any time should you feel the pain during the procedure feel free to let the doctor know.
2. Bleeding: usually minimal bleeding from local site is present and stops in few minutes. In case it does not please make sure you tell doctor immediately. Blood thinning medicines like warfarin and acitrome will be stopped as decided by the doctor.
3. Fainting: common with anxious patient usually when painful and stressful situations arise and will be managed by the doctors in case it happens after procedure please inform doctor immediately.

What are the costs of doing the procedure?

Considering that the procedure is done in a indoor / hospital setting, it will vary among different hospitals. Please discuss this with the doctor / hospital billing section.

WHAT DO I EXPECT ON THE DAY OF THE PROCEDURE?

On the day of procedure **don't** stay empty stomach / fasting. This procedure should take approximately 45minutes to 1 hour. Discuss all the medication with the doctor before and after the procedure. The doctor will check the blood investigations including the blood counts, platelets and the INR if not an emergency. The doctor will perform examination prior to performing the procedure and ask for consent in writing before the procedure. In case of trauma and

expected bleeding the blood group will be checked or confirmed in event of emergency. After the routine checks, the chest will be cleaned with solutions. With all sterile precautions. (Avoiding even minimal infections from outside), local anesthesia will be given. The needle will then be inserted between the ribs in the anaesthetised area and connected to a tube and drainage bottle. Sample for diagnosis will be removed from the fluid and sent for testing. X ray of the chest will be done to check the status of the fluid and position of tube, etc. after the procedure and from time to time.

Can anything go wrong?

There is a small risk of infection and bleeding but every effort is made to prevent this from happening. Air can also sometimes leak into the pleural space during the procedure and may need further ICD tube placement but this essentially happens quite rarely.

What happens after the Pleural Tapping been done?

Pleural fluid removed will be sent for testing and the remaining of the fluid in the chest will be treated with medical therapy. Repeated needle insertion into the chest is painful and may cause more problems in future. The sample reports should be available in the weeks to follow and response to treatment can be judged. Follow up with the reports with you doctor.