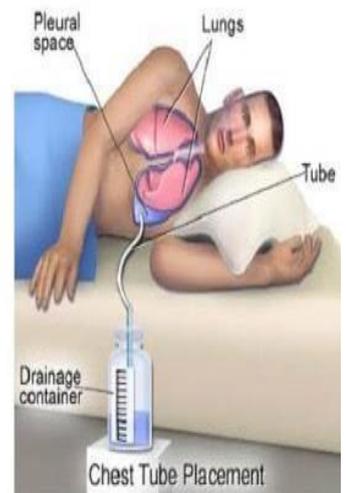
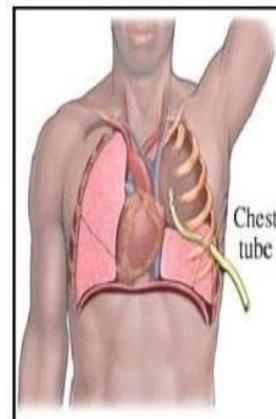


**“INTERCOSTAL DRAINAGE TUBE (ICD) IS A NECESSARY TOOL TO TREATMENT AND FAST RESOLUTION OF PROBLEMS. IT SHOULD BE USUALLY UNEVENTFUL AND WITH MINIMAL PAIN.”**

## **What is Intercostal Drainage Tube?**

**BREATHE FIT LIVE FIT**



### **CHEST CARE CLINIC, KHARGHAR**

**Dr. VISHAL GUPTA- CHEST SPECIALIST**  
**Dr. DEEPIKA UGHADE GUPTA- CHEST SPECIALIST**  
**TIMINGS: MON TO SAT , 10:00 AM TO 1:00 PM AND 5:00 PM TO TO 9:00 PM.**  
**SUNDAY CLOSED**

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Intercostal Drainage (ICD) is a tube placement inside the chest to allow fast removal of fluid and the pus accumulating inside the pleural space. The lung is covered on outside by a covering called pleura. The chest wall (muscles) are covered on the inside by another layer of pleura. The space between them is called pleural space. There is usually very small amount of fluid there normally. The presence of large amount of fluid happens with diseases like Infections, pneumonia, Tuberculosis, Cancers, Heart failure and other conditions. In certain situations, Air can enter this space rapidly like trauma or pneumothorax. This can be serious and life threatening if not attended immediately. It is important to relieve pressure immediately by passing a plastic flexible tube called intercostal drainage tube in the chest. This allows faster recovery from all problems and rapid relief from symptoms.

### **Why do I need intercostal drainage tube?**

Most commonly intercostal drainage is put to evacuate

1. Infections (Tuberculosis / Pneumonias).
2. Pneumothorax (Air in the pleural space).
3. Before and after surgery: Thoracoscopy
4. After trauma to chest to assess the bleeding internally (Hemothorax).
5. Excess pleural fluid in selected cases.

### **Where is it done?**

It is an indoor admission procedure. The concerned patient will be admitted for the procedure and kept for atleast 2-3 days. Typically admission days vary individually and with the diseases for which ICD tube was put. The important points should be discussed with the doctor during visits.

### **What am I to expect after the drainage tube?**

1. Pain: The ICD is put under local anesthesia and with mild sedation. This makes it minimally painful during the passage of tube in the chest. Once completed the tube stays in the chest till decided on removal and fixed in place using suture / stitches on the chest. There will pain medications prescribed to manage the pain associated and individually tailored. The pain is temporary and stops after removal of the drainage tube. 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.

### **WHAT DO I EXPECT ON THE DAY OF THE PROCEDURE?**

On the day of procedure donot 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 drain will then be inserted between the ribs in the anaesthetised area and connected to a tube and drainage bottle containing water. The water acts as a one way seal to prevent air or fluid to drain out and not go back into your chest. We use both a stitch, to tie the drain in, and adhesive dressing on the skin. However, please move carefully as drains can still be pulled out. XRays 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?

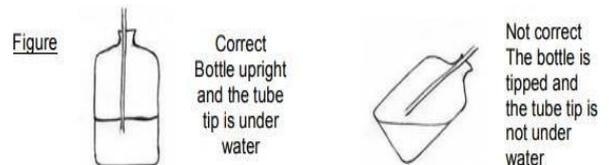
There is a small risk of infection and bleeding but every effort is made to prevent this from happening. Air can also sometimes leak into the pleural space during the procedure but this is not usually a problem and it will usually come out when the drain is in place.

### Important things to know about your chest drain

- You may see air bubbling out through the bottle. This is normal. Fluid may also drain from the chest. This is usually clear but sometimes may be blood stained. This is nothing to be alarmed about.
- There is no need for you to be in pain. If you are in pain ask for painkillers.
- The drain can come out if pulled or twisted so please take care. If the drain does come out tell someone straight away.
- You need to keep the drainage bottle below the level of the drain (at the point it enters the chest). Usually it is placed on the floor. If

you feel more breathless, please tell the nursing staff. The drainage bottle contains water which acts as a „seal“ to prevent air leaking back up the drain into the pleural space. It is essential therefore that the bottle is kept upright at all times with the tube below the water surface.

- Figure



- Your drain may require „flushing“ with sterile water to stop it from blocking. If this is needed it will be done by the nursing staff and is not painful.

### What happens after the drain has been removed?

You may have a stitch left in which is usually removed after 7 days. Some people have a little pain after the drain has been removed which may be helped by painkillers. If you have a lot of pain, difficulty breathing, or fever please tell a doctor or nurse so they can look for a cause and treat it.