GIG CYMRU NHS WALES
Bwrdd Iechyd Prifysgol Caerdydd a'r Fro
Cardiff and Vale University Health Board

ICU LocSSIP: Intercostal Chest Drain

Minimum 2 person Team

TIME & DATE:

OPERATOR & GRADE:

ASSISTANT & GRADE:

Patient ID sticker

ADDITIONAL STAFF (inc SUPERVISION):

TEAM CHECKS BEFORE

IN AN EMERGENCY, PLEASE TAILOR THIS CHECKLIST DOWN AS NEEDED

Patient ID confirmed? .....Yes ☐

Consent? (circle) Verbal consent / best interests decision / other

Indication? (specify) .....

Correct Drain Type & Size? (circle) Seldinger / Surgical Fr.....

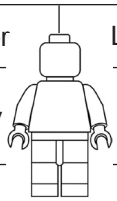
Most recent CXR / CT/ USS imaging reviewed to confirm site .....Yes ☐

Mandatory assistant present +/- direct supervision / considered if specialist help could make this procedure safer? .....Yes ☐

All equipment and monitoring present including US & sterile probe cover which should be used if draining fluid? .....Yes ☐

ALLERGIES, CLOTTING & PLATELET LEVELS CHECKED .....Yes ☐

Drain Site (circle)



Exact Location:

Emergency

Elective
Best done 8am to 6pm

ASSISTANT TO READ TIME OUT!

All team members ID'd & roles assigned? ..... Yes ☐

Patient position optimised ..... Yes ☐

Is patient adequately sedated/ analgesed? ..... Yes ☐

Skin cleaned with 2% chlorhexidine & sterile field (drape) in place ..... Yes ☐

Operator: hat and mask & has washed hands with anti-septic soap prior gowning and gloving? ..... Yes ☐

Any concerns raised by team members? Yes, discussed, see free text ☐ ..... No ☐

OPERATOR DURING PROCEDURE

Anatomy confirmed using ..... Landmarks ☐ ..... USS ☐

Details of local anaesthetic used: ..... Lignocaine _____% _____ml

Sterile field maintained? No, see free text ☐ ..... Yes ☐

For fluid, record results, or tick if requested. Only use gas analyser if sample non-particulate:

Pleural sample (gas analyser):	pH	Glucose	Lactate
ABG sample (gas analyser):	pH	Glucose	Lactate
Pleural sample (to lab)	pH LDH	Glucose WCC + MC&S	Protein Cytology
	Blood Cultures (aerobic & anaerobic samples)		
Serum samples (to lab)	Glucose	Protein	LDH (paired)

All lab pleural samples should be 2-5mLs fluid in a white top container with the exception of blood cultures and glucose which go in their own containers. Please label these specimens clearly and ensure delivery to the lab.

See reverse side for Sign out

CHEST DRAIN

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TEAM SIGN OUT

SELDINGER GUIDEWIRE REMOVED (2 PERSON CHECK TO AVOID NEVER EVENT) YES ☐ N/A ☐

Depth of insertion at skin ..... cm

Sutures / tubing / dressing secured ..... Yes ☐

Details of dressings: .....

.....

.....

Post-procedure handover to responsible nurse? ..... Yes ☐

Details of Handover .....

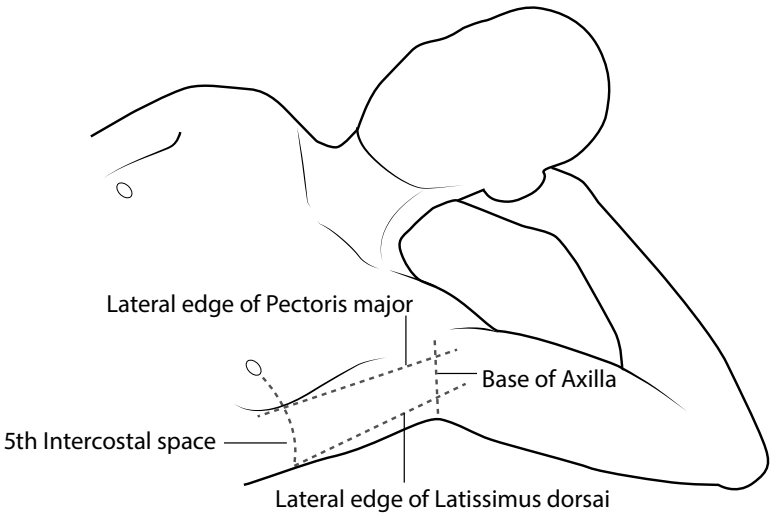
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CXR Requested (should be performed within 2 hours) ..... Yes ☐

CXR Report:

Sign / Print / GMC ..... Time / Date .....



Triangle of Safety

Free Text (eg necessary deviations from LocSSIP due to emergency)

Signature / Print / GMC:

Clamping chest drains risks tension pneumothorax

CHEST DRAIN

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