

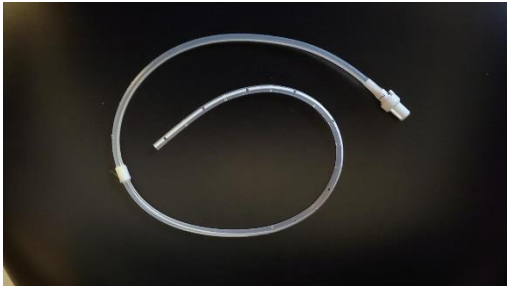


Having an Abdominal Drainage Catheter Inserted

This handout offers information on what you need to know before having an abdominal drainage catheter inserted.

What is a drainage catheter?

A drainage catheter is a soft silicone rubber tube. This drainage catheter is inserted (put) into your abdomen by a doctor to allow built up fluid in your abdomen to drain out. It may be inserted surgically or by an interventional radiologist using an ultrasound machine. This is a picture of a drainage catheter:



What is ascites?

Ascites is the buildup of fluid in the space between the lining of your abdomen (belly) and abdominal organs (also called peritoneal cavity). If there are cancer cells in this fluid, it is called malignant ascites. Having this buildup of fluid in your abdomen may make you:

- Feel short of breath,
- Have pain in your abdomen
- Gain weight

How a drainage catheter can help you

You have needed a procedure called a paracentesis to regularly remove the built up fluid from your abdomen. A drainage catheter allows the built up fluid to be drained from your abdomen without having to have a paracentesis at the hospital. With a drainage catheter, the built up fluid can be removed at home by a visiting nurse. It can also be done more often than a paracentesis to remove smaller amounts of built up fluid.

What you need to do to prepare to have a drainage catheter inserted

1. If you take **Aspirin®**, do not stop it. Keep taking it as prescribed by your doctor.
2. If you take a blood thinning medication (other than Aspirin®)

You may need to have bloodwork done before your drainage catheter is inserted. The results of this bloodwork helps the doctor decide if you need to stop your

blood thinning medication before your drainage catheter is inserted. Talk to your doctor or nurse if you have any questions about this.

3. The doctor may order a laxative for you to take before your drainage catheter is inserted.
4. Do not drink alcohol for 24 hours before your drainage catheter is inserted.

On the day your drainage catheter drainage is inserted

- An adult must drive you to and from the hospital and stay with you for 24 hours after you go home.
- Bring your health card and a list of the medications you are taking to this appointment.

If your appointment is in the morning

- Do not eat or drink anything after midnight the night before your drainage catheter is inserted.
- Take your regular medications with a sip of water.

If your appointment is in the afternoon

- Do not eat anything after midnight the night before your drainage catheter is inserted.
- You may drink clear fluids in the morning. Clear fluids include water, clear fruit juices you can see through, clear tea (no milk or sugar) and black coffee (no milk or sugar).
- Stop drinking fluids 2 hours before your drainage catheter is inserted.

Having your drainage catheter inserted

Check in at the reception desk of the Diagnostic Imaging department. The Diagnostic Imaging department is located in the N-wing on the main floor of the hospital. You will change into a hospital gown and lie down on a stretcher. A nurse will insert an intravenous (IV) line into one of your veins. The interventional radiologist will tell you how the drainage catheter is inserted and answer any questions you have. You will sign a consent to have the drainage catheter inserted. You will be given medication(s) that help you relax and make you sleepy.

You will be brought into a procedure room and moved onto an X-ray table. A nurse takes your blood pressure, heart rate, and checks your oxygen levels. This is done many times while your drainage catheter is being inserted. An oxygen mask may be placed on your face. It takes about 1 hour for the drainage catheter to be inserted.

The skin on your abdomen is cleaned with an antiseptic to keep you from getting an infection. It will feel cold and wet and may colour your skin pink. The interventional radiologist inserts a needle into your abdomen. You will feel the needle stick and then

some mild burning. This needle has medication in it to freeze the area so you do not feel pain when the drainage catheter is inserted.

The interventional radiologist makes two small cuts (punctures) in your skin. The drainage catheter is inserted through the first small cut and under your skin (tunnelled) to the second cut. You may feel a little pushing or pulling at this time. An ultrasound or x-ray is used to make sure it is inserted in the right place. The 2 cuts in your skin are closed with stitches.

The built up fluid in your abdomen is drained out at this time. After the fluid is drained out, your drainage catheter is closed with a cap or connected to a drainage bag. The drainage catheter is taped to your abdomen to keep it in place.

A bandage dressing is placed over the stitches where the drainage catheter is tunneled under your skin. The visiting nurse is to remove this stitch, 10 days after your drainage catheter is inserted.

A second bandage dressing is placed over the stitches where the drainage catheter comes out of your skin. These stitches hold the drainage catheter in place where it exits your skin. The visiting nurse is to remove these stitches, 7 weeks after your drainage catheter is inserted. This stitch needs to remain in place for 7 weeks to allow your skin to heal into the catheter. This keeps it in place after the stitch is removed. Your drainage catheter has a small balloon that sits just below your skin. This balloon cannot be seen. It helps to hold your catheter in place after the stitches are taken out.

You will stay in the hospital for about 2 to 4 hours after your drainage catheter is inserted. A nurse cares for you during this time.

You need an adult to drive you home and stay with you for 24 hours because of the medications you were given. You can drink and eat your normal diet.

After your drainage catheter is inserted

A visiting nurse from Ontario Health atHome (home care) comes to your home 24 hours after your drainage catheter is inserted. This nurse changes your bandage dressing(s). If these dressing(s) stay dry, they only need to be changed every 2 to 3 days.

Do not get your dressing(s) wet for the first 2 weeks. Your incision(s) need to stay dry. Wash your hands before touching your dressings. This helps prevent infection.

You may take a shower with the dressing off when your incision(s) are healed. After your shower, you need to put a new dressing on. Do not have a tub bath, sit in a hot tub or swim with your drainage catheter. Talk to the visiting nurse if you have any questions about this.

The visiting nurse drains the built up fluid in your abdomen as often as the doctor orders it to be done. This is usually every 1 to 3 days.

Go to the Emergency Department at the hospital closest to you if you have:

- New or worsening pain in your abdomen
- Bleeding that soaks through the dressing over your drainage catheter site
- A fever above 38.3° C/100.9°F at any time or above 38.0° C/100.4°F for more than an hour
- Shakes and chills (with or without a fever)

Call the Interventional Radiology Department if:

- You have any drainage fluid that soaks through the dressing over your drainage catheter site. Leave your drainage catheter connected to the drainage bag if it is leaking. Your visiting nurse can help you with this.
- You have redness, swelling or green/yellow discharge around your drainage catheter site.
- Your drainage catheter comes out or you feel like it is coming out.

Call 905-576-8711 extension 33527 between the hours of 8 am and 4 pm and ask to talk to the interventional radiology clerk. After 4 pm or on weekends or holidays, call 905-433-4305 and ask to talk to the interventional radiologist on-call. Go to the Emergency Department at the hospital closest to you if you are not able to talk to an interventional radiologist.

To leave a non-urgent message with a question you have, call the Interventional Radiology Department at 905-576-8711 extension 33527. Your call will be returned on the next regular work day.

Talk to a member of your health care team if you have questions or do not understand any information in this handout.

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