

Having a chest drain inserted to remove air/fluid from around your lung

Respiratory Medicine

Information for Patients

Last reviewed: August 2025

Next review: August 2028

Leaflet number: 1326 Version: 2

Introduction

This leaflet will give you information about having a chest drain inserted.

What is a chest drain?

A chest drain is a tube that is put between the ribs and the space between the lung and the chest wall (pleural space). The tube is attached to a bottle. It will help your lung expand again. This is a common procedure.

Why do I need a chest drain?

There are a few different reasons why people need to have a chest drain inserted. This may be because you have a:

- **Pneumothorax:** air entering the pleural space.
- Pleural effusion: fluid in the pleural space.
- Empyema: pus in the pleural space.
- Haemothorax: blood in the pleural space.

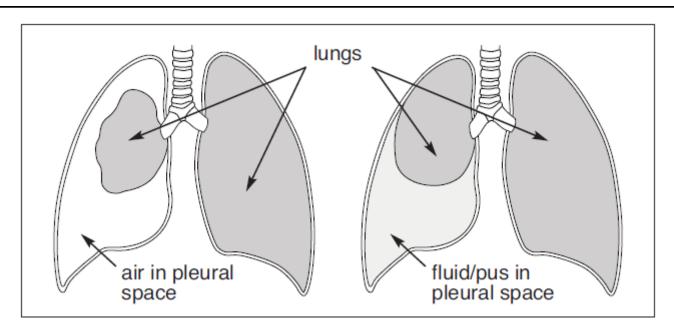
The diagram on the next page shows air trapped around the lung or fluid around the lung.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals

To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net





Who will insert my chest drain?

A qualified and experienced doctor or nurse will put in the drain. We are a teaching hospital, sometimes a qualified trainee doctor may insert the drain. But they will always be supervised by a doctor who is already fully trained in the procedure.

Where in the hospital will my chest drain be put in?

Normally, we put in your chest drain on ward.

Will I need to stay in hospital whilst my chest drain is in?

Yes.

How will the chest drain be put in?

- We may give you painkillers about 30 minutes before the procedure.
- We will ask you to sit with your head and arms resting on a pillow placed on a table. Or we will ask you to lie on the bed with your arm above your head.
- The doctor will decide the best position on for your drain. This is usually the side of your chest just underneath the armpit.
- The doctor may use an ultrasound machine to show where best to place the drain.
 Ultrasound helps the doctor to 'look' through the chest wall. It is painless and non-invasive.
 We put a cool gel on the skin to make sure there is good contact for the ultrasound tip.
- We will clean the skin with an antiseptic lotion. We will put sterile towels around the area.
- We will give you an injection of local anaesthetic to make the area numb. We will then make
 a small cut in the chest. We insert the drain through this. It is normal to feel pressure as the
 drain is inserted. But if you feel any pain or discomfort let the doctor know.

- We will stitch the drain to your skin to keep it firmly in place. We will put a dressing over the area.
- The other end of the drain will be attached to a special drainage bottle.
- After your chest drain has been put in, we will do a chest X-ray to check that the tube is in the right place.
- The whole procedure often takes about 20 to 30 minutes.

What are the risks of inserting a chest drain?

- **Pain:** some people do have pain during or after the procedure. This is despite having painkillers and local anaesthetic. We can give you more painkillers if you need them.
- **Bleeding:** you will get a small amount of bleeding around the site. This will often stop quickly without treatment. More serious bleeding into the chest or damage to other organs in the chest is extremely rare.
- **Infection:** there is a slight risk of an infection to the chest. We can treat this with antibiotics. There is also a slight risk of a skin infection around the wound where the drain enters the chest.
- **Air leak:** sometimes there may be a leak of air from the chest into the skin around where the drain enters the chest. You may notice this as a 'crunchy sound' on pressing the skin around the drain.
- **Misplacement:** very rarely the drain may be put in the wrong place. This can cause damage to other nearby organs. This may be the lung itself, the liver, spleen or heart depending on which side of the chest the drain is inserted.
- **Drain failure, dislodgement or blockage:** sometimes the drain may dislodge and fall out, become blocked or not work.

Will I feel uncomfortable with the drain?

Some patients do complain of pain, discomfort or aching around the tube. We will give you regular painkillers. Please tell your nurse if you have any discomfort.

Suction

Sometimes a lung needs some help to expand again. We can connect the drainage bottle to a suction unit on the wall. The gentle suction will help the lung to expand again.

Can I move around?

You can move and walk around with a chest drain. You must carry the drainage bottle with you. Always carry the bottle below the level of your waist.

If the drain is on suction you may need to stay by the bedside. Ask the nurse looking after you for advice.

Patient Information Forum



What can I do to help my lungs expand?

You can help by trying to:

- breathe deeply
- cough
- move around regularly

This will help drain the fluid or air. It will also help your lungs to expand. Tell the nurse or doctor if you are in pain or have any discomfort.

How long will my chest drain be in for?

The chest tube often stays in place until the X-rays show that all the blood, fluid, or air has drained from the chest and the lung has fully expand again.

Removing the drain

Removing the drain is a simple procedure. When the tube has been removed, we may need to stitch the wound. You can then remove the stitch after 5 to 7 days. This can often be done at your GP practice or by a district nurse.

Any questions?

If you have any more questions please ask your doctor or nurse on the ward.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔ علی هذه المعلومات بلغةٍ أُخرى، الرجاء الاتصال علی رقم الهاتف الذي يظهر في الأسفل જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કુપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ। Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net



Previous reference: RES025-1011