## Closed Chest Drainage Check List WEST COAST UNIVERSITY

## Student:

NPSO         Wash hands per COC guidelines.         Important patient privacy.           Provide patient privacy.         Important patient privacy.         Important patient privacy.           NPSO         Identify patient correctly using two identifiers (check to chart).         Important patient p			Peer 1	Peer 2	Faculty Evaluation
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Discard used materials.     Image: Constraint of the section of the se					
Documentation – Chest tube insertion         Informed consent					
Informed consent					
	Documen	tation – Chest tube insertion	1		
Date, time of insertion					
	Date, tir	ne of insertion			

Anatomical location of insertion		
Size of tube		
Reason for insertion		
Breath sounds, respiratory rate and depth, oxygen saturation before and after insertion		
Characteristics, amount of chest tube drainage		
Dressing application, status		
Complications (if applicable)		
For patients going home with mobile drainage device: instructions, contact information, follow-up appointments		
Discard tubing and blood bag. Flush IV as needed.		
Documentation – Chest Tube & Drainage System Maintenance		
Schedule for drainage checks, dressing changes		
Status of insertion site, surrounding skin		
Type of dressing		
Drainage on dressing		
Dressing change time, date		
Respiratory assessment		
Characteristics, amount of chest tube output		
Functioning of closed-chest drainage system		
Any procedural changes (i.e., reduction in suction, open to water seal)		
Strategies to promote ventilation, oxygenation (head of bed elevation, incentive spirometry, positional changes,		
ambulation)		
Pain level, interventions for pain management		
Documentation – Chest Tube Removal		
Date, time of removal		
Breath sounds, respiratory rate and depth, oxygen saturation before and after removal		
Characteristics, amount of chest-tube drainage		
Dressing application, status		
Complications (if applicable)		

Peer 1:	 	
Peer 2:		

Faculty Evaluator:

Date:

Comments: