What is a Pleural Tap?
A pleural tap is a procedure performed under ultrasound guidance to drain fluid that has accumulated in the space between the lung and the chest wall.

What to Bring:
Bring any relevant imaging scans (film packet or a CD containing X rays, CT scans, ultrasound or MRIs etc.)

Preparation:
You may be required to have a blood test prior to your pleural tap to check your blood clotting levels.

Arrange for someone to take you home from your procedure.

Eating/ drinking:
You may eat but a light meal only, you may drink as normal.

Medications:
Tell staff at the time of booking if you are taking any:

- Blood thinning medications (e.g. Warfarin, Xarelto, Rivaroxaban, Pradaxa, Apixaban, Eliquis),
- Antiplatelet medications (e.g. Clopidogrel, Plavix, Aspirin)

You will be informed if you need to stop taking these medications before your procedure.

Continue taking other medications as prescribed, unless directed otherwise by medical or nursing staff prior to your procedure.

Please bring a list of all your medications with you to your appointment.

Procedure:
On arrival to the hospital a nurse will discuss with you your medical history and insert a small plastic tube (cannula) into a vein in your hand or arm.

You will be sitting up on the side of the bed with your arms resting comfortably on a table in front of you. Using the ultrasound the doctor will locate the fluid and determine the safest approach to drain the fluid. The doctor will explain the procedure and discuss with you the potential risks and you will be asked to sign a consent form. Your heart rate and blood pressure will be monitored by the nursing staff.
Pleural Tap
Radiology Service

Your skin will be cleaned with antiseptic wash, and local anaesthetic will be used to numb a small section of your skin on your back. A small incision will be made and a thin needle with a drain tube attached will be inserted through the numb patch of skin into the space with the trapped fluid. The needle will be removed leaving the small drain tube in place. The drain tube will be secured with a dressing and left in place to drain.

**Post Procedure Care:**
You will return to the day procedure recovery unit for the duration of the drainage where you will be monitored by the nursing staff.

Once the fluid has stopped draining the tube will be carefully removed and a dressing will be placed over the procedure site.

**Discharge:**
Generally you will be able to go home the same day as your procedure if you have no other medical conditions/concerns that require further treatment.

You will be provided with an information sheet regarding discharge instructions upon completion of your procedure.

**Results:**
The results together with the procedure report will be sent to your referring doctor. Return to your doctor to discuss examination results.

**Radiation Risk**
Most medical imaging tests, except MRI and ultrasound, involve exposure to radiation from X-rays. Your doctor considers that the benefits of the examination you require to be greater than the small risk posed by the radiation exposure.

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**References**
**Inside Radiology:**
The Royal Australian and New Zealand College of Radiologists®

If you would like to provide feedback contact us at patient.information@alfred.org.au