INFORMATION FOR PATIENTS AND FAMILIES

Pleural Aspiration (under local anaesthetic)

This leaflet provides information about the test you are due to have. It should replace the discussions you have with the doctors and nurses involved in your care, If you have any queries or questions please do not hesitate to ask the staff looking after you.

What is a pleural aspiration?

It is a procedure performed by the respiratory doctor; they pass a fine needle through the skin to the fluid surrounding your lung. Depending on how much fluid is there the doctor will drain off as much as possible and a sample of the fluid will be collected and sent to the laboratory for analysis.

Why has the test been advised?

The aspiration can give the doctor information that may help to understand why you have been experiencing the symptoms you have or why your chest scan is abnormal. It can rule out or diagnose conditions and help to make treatment decisions. Also depending how much fluid is drained away, it may ease your breathlessness

Is there an alternative test?

This depends on your symptoms or your medical conditions. A pleural aspiration gives very specific information. Your doctor will discuss alternatives if possible.

How do I prepare for the test?

- Eating and drinking you can eat and drink as normal but avoid heavy meals.
- Medication you should have been advised to stop any blood thinning medication i.e. warfarin, heparin injections. If you have not been given advice please ring your consultant's secretary asap.
- Consent form you will have test explained to you and asked to sign a consent form, this will give you an opportunity for questions.

What will happen before the test?

The respiratory doctor on the ward will go through what to expect. The staff will position you on your bed you so that you are comfortable and in a position that allows the doctor to do the aspiration. The staff will advise you to keep still as best you can and they will be with you throughout the procedure. The doctor will inject your skin with an anaesthetic so that it goes numb before he passes the aspiration needle.

How long does the test take?

It takes approximately 10 - 30 minutes, depending on the amount of fluid drained. You will need to be on the ward a couple of hours before and afterwards.

What are the risks with this test?

The test is a safe procedure but all procedures have risks but complications are rare. The risks include bleeding and air can leak into the space surrounding your lung (pneumothorax), often no treatment is needed. Very occasionally treatment with a tube to drain the air is advised and this would involve staying in hospital until resolved.

Any risks will be discussed with you at the time of you signing your consent form.

What happens after the test?

A nurse will look you after until you leave the hospital. Your breathing rate, heart rate and blood pressure will be checked. You will be advised to rest on your bed/chair after the aspiration until the check chest x-ray is done. You will probably have a chest x-ray after the aspiration, this is to check if any air has leaked around your lung.

You may cough up some blood or blood stained sputum, this is normal and usually ceases within 24 hours. If you feel unwell please inform the nursing staff. You can eat and drink as normal, unless advised otherwise.

Results of the test

The fluid samples will take approximately 5-10 days to be processed, so a follow up appointment will be arranged for after this time for you to see the Consultant who referred you for the test. The arrangements of this appointment will be discussed with you prior to going home.

Going home and usual activities

You will be able to go home, once your chest- ray has been reviewed and no air leak found and you are feeling well enough to go home. We advise you should rest for the remainder of the day. You will need somebody to accompany you home and to stay with you for 24 hours. If this is not possible please discuss this with the secretary or the nurse on the ward.

Most people feel able to resume normal activities after 24 hours. You will have a plaster over the aspiration area that can be removed the next day and we expect will be dry, if there is any swelling or bleeding seen you should seek medical advice.

If you cough up large amounts of blood, develop chest pain, worsening breathlessness, fever or become unwell, please seek medical attention.

For further information visit:

www.lhch.nhs.uk