



Thoracostomy Tube Irrigation

Indication: 18 yo, blunt or penetrating injury resulting in traumatic hemothorax or hemopneumothorax, SBP >100mmHg with any retained hemothorax on x-ray

Supplies: Standard Thoracostomy Tube Tray (chest tube tray)

28-36 French Thoracostomy Tube

1000ml sterile WARM normal saline

60 mL sterile Toomey Syringe (plunger removed)

Procedure Outline:

1. A 28-36 Fr. Thoracostomy Tube (TT) is placed utilizing standard aseptic technique
2. Insert the sterile Yankauer in to the TT.
 - Suction maintained until no return of effluent
 - Operative intervention pursued in the setting of initial output $\geq 1,500$ mL.
3. Option: At discretion of attending, suction catheter maybe inserted directly into chest to evacuate hemothorax prior to placement of TT.
4. Record amount of hemothorax drained
5. The sterile 60mL Toomey syringe is connected to the TT as a funnel to allow for irrigation
6. 500mL of warm sterile saline is instilled via the TT by pouring through the Toomey syringe.
 - Saline poured by an assistant into the open end of the 60mL syringe.
 - The syringe is held above the level of the chest to ensure proper instillation.
7. Sterile suction is reinserted into TT to evacuate the thoracic cavity.
8. Steps 3-5 are repeated for a total of 1,000mL of irrigation
9. Record amount of fluid removed following irrigation
10. TT is connected to a standard atrium and placed to 20mmHg suction for the first 24 hours.