Patient Education



Wound Drainage System Instructions for Head and Neck Patients

After your surgery, you may go home with a wound drainage system. The system drains fluid from your wound in order to promote healing. It includes a suction reservoir with a drain (flexible tubing). As the reservoir expands, the suction created pulls out excess fluid. If this fluid collects under the skin, it can cause discomfort and difficulty with arm mobility.

General Care

Drain Site and Wound Drainage System

In order to go home with the wound drainage system, you must learn how to take care of it. You will be shown how to care for your drain site and wound drainage system.

- General care of the catheter site instructions below.
- To empty and reactivate the wound drainage system, you or someone caring for you will need to follow the instructions below.

Home Care

You will need to:

- Empty, measure and record the amount of fluid from the bulb 2 times a day.
- Care for the skin around your drain site every day. It is important that this area remains clean and that you look for any signs of infection.
 - Signs of infection include: increased redness or tenderness around the drain site, warmth to the area, fever, swelling, a bad smelling (foul) odor, or pus.
 - A cotton swab dipped in water can be used in a circular motion around the drain site to help clean it.
 - Gently remove crust or dried blood around the drain.
- Place a gauze pad under the drain site on the skin if this is comfortable and tape to hold the gauze in place. Or, you can place it over the drain if it is leaking around the tube near the skin. Sometimes, leaking can happen as the drain moves around and the hole gets a little larger than the tube.

Emptying the Reservoir

Empty your reservoir into the measuring container twice a day. Do not let the reservoir fill completely because the drainage will stop. If the drainage stops, contact a member of your health care team. Follow these directions each time:

• Have your supplies ready in a clean, dry area. Wash your hands before and after handling the reservoir. If instructed, wear latex gloves.

Do not disconnect the tubing from the reservoir at any time!

Your nurse will instruct you to "strip" the tubing prior to emptying the reservoir. This should be done twice a day.

- See Figure 1. Unplug drainage plug (A) from the emptying port (B). Hold the reservoir upside down over the measuring container and squeeze the reservoir to empty the collected fluid.
- On the attached "Volume of Drainage" chart, record the date, time, and amount of fluid collected.



Figure 1 ©MDAnderson Cancer Center

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Reactivating the Reservoir

You will need to reactivate the reservoir after you empty it.

- 1. See Figure 2. Squeeze to compress the reservoir as completely as possible.
- 2. See Figure 3. With reservoir compressed, insert the drainage plug (A) into the emptying port (B) as far as possible and release the reservoir. The reservoir should expand gradually as it fills with fluid. If the reservoir does not expand gradually over a period of hours and collect fluid, contact a member of your health care team.
- 3. Flush the collected fluid down the toilet after making note of the measured amount of fluid. Clean the measuring container with water so it is ready for the next collection.
- 4. Using the plastic strap, attach the reservoir to your clothing as directed. You must place the reservoir below the drain site to maintain adequate drainage. **Do not** disconnect, kink, or puncture the tubing that is connected to the reservoir. If the tubing is disconnected or damaged, contact a member of your health care team.



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Figure 3 ©MD Anderson Cancer Center

Call your doctor or nurse if:

- □ The reservoir cannot be reactivated
 - \Box The drain falls out or is accidentally cut
 - \Box The drainage fluid in the reservoir becomes foul smelling or is white or milky in color.
 - \Box Your temperature is 101°F (38.3°C) or higher
 - □ There is any increased redness, swelling, or abnormal drainage from the drain site
 - □ There is an air leak, fluid leak, or any other failure with the system
 - □ Clots form in the tubing and block drainage
 - □ The reservoir is not collecting any fluid

Drain Removal

Please follow these guidelines for drain removal:

- □ Your appointment for drain removal will be scheduled when you are discharged from the hospital. The drain will be removed in the same clinic where you had your appointment before surgery. It may be removed by a member of your health care team when the drainage is **less than 30cc for a 24 hour period**.
- □ If your drainage output is not less than 30cc for a 24 hour period at the time of your scheduled appointment, please call your clinic nurse or the triage nurse. The nurse will determine if your drains are ready for removal and if your appointment will be rescheduled.

Volume of Drainage

Record the date and time, the amount of drainage, and your temperature under the appropriate column. Bring this completed chart with you to each follow-up visit.

Date and time	Morning amount	Evening amount	Total daily amount	Your evening temperature

Adapted with permission from *Jackson-Pratt[®]* Wound Drainage System: Patient Instruction Guide (Allegiance Healthcare Corporation).

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