After your surgery, you may go home with a wound drainage system (JP Drain). The system drains fluid from your wound to help you heal. It includes a suction reservoir with a drain (flexible tube). As the reservoir expands, the suction created pulls out excess fluid. Pulling out the fluid decreases discomfort and improves mobility.

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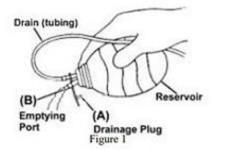
To empty and reactivate the wound drainage system, you or someone caring for you need to follow the instructions below.

Emptying the Reservoir

Drain Care with Breast Surgery

Empty the reservoir into the measuring cup at least every 12 hours (9am & 9pm). Empty it more often, if the reservoir becomes half full. **Do not** let the reservoir fill completely because the drainage will stop. If the drainage stops, contact a member of your healthcare team.

- Do not disconnect the tubing from the reservoir at any time
- Uncurl any kinks in the tubing and "strip" tubing as needed to prevent blockages



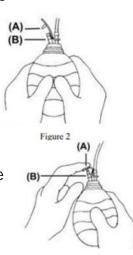
- Unplug the drainage plug (A) from the emptying port (B). See Figure 1. Hold the reservoir upside down over the measuring cup and gently squeeze the reservoir to empty the collected fluid.
- On the attached Volume of Drainage chart, record the date, time, and amount of fluid collected.
- Only measure in milliliters (mL) as marked on the measuring cup.
- Flush the fluid down the toilet after recording the amount. Clean

the measuring cup with water so it is ready to use for the next collection.

Reactivating the Reservoir

You need to reactivate the reservoir after it has been emptied.

- 1. Squeeze to compress the reservoir as completely as possible. See Figure 2.
- 2. With reservoir compressed, insert the drainage plug (A) into the emptying port (B) as far as possible and release the reservoir. See Figure 3. 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.











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- 3. Using the plastic strap, attach the reservoir to your clothing with a safety pin or in a pocket below the level of incision. This helps to keep the tube from being pulled out.
- 4. You must place the reservoir below the drain site to be sure it drains properly. **Do not** disconnect, kink, or puncture the tubing that is connected to the reservoir. If the tubing becomes disconnected or damaged, contact a member of your health care team.

"Stripping" the tube: to prevent blockage within the tubing

- 1. Hold the tubing where it leaves the skin with one hand. This will keep it from pulling on the skin. **Do not** touch the insertion site.
- 2. Pinch the tubing with your other hand using your thumb and forefinger.
- 3. Slowly and firmly pull your pinched fingers down the tubing toward the reservoir. This will help to push any clogged fluid/clots through the tube. You may find it helpful to hold an alcohol swab between your fingers and the tubing to lubricate the tubing.
- 4. If the tube still does not drain, call your health care team.
- 5. If pulling hurts or feels like the tubing is coming out of the skin, **stop**. Begin again more gently.



Call your doctor or nurse if:

- The reservoir cannot be reactivated
- The drain falls out or is accidentally cut
- The drainage fluid in the reservoir has a foul smell
- You have a fever of 101F (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 malfunction in the system
- Clots form in the tubing and block drainage
- The reservoir is not collecting any fluid.

**If you are having breast reconstruction at the same time, defer to your wound care instructions from your plastic surgeon. **

Volume of Drainage

Record the date and time, the amount of drainage under the proper column. Bring this completed chart with you to each follow up visit. Use the measuring cup you are given, to only measure in milliliters (mL's).





1.844.632.2278

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP#1				
JP#2				
JP#3				
JP#4				
JP#5				
JP#6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP #1				
JP #2				
JP #3				
JP #4				
JP #5				
JP #6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP#1				
JP#2				
JP#3				
JP#4				
JP#5				
JP#6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP #1				
JP #2				
JP #3				
JP #4				
JP #5				
JP #6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP#1				
JP#2				
JP#3				
JP#4				
JP#5				
JP#6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP #1				
JP #2				
JP #3				
JP #4				
JP #5				
JP #6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP#1				
JP#2				
JP#3				
JP#4				
JP#5				
JP#6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP #1				
JP #2				
JP #3				
JP #4				
JP #5				
JP #6				

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Drain	Date	Output AM	Output PM	Total (AM+PM)
JP#1				
JP#2				
JP#3				
JP#4				
JP#5				
JP#6				

Drain	Date	Output AM	Output PM	Total (AM+PM)
JP #1				
JP #2				
JP #3				
JP #4				
JP #5				
JP #6				

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