

Caring for Your Closed Bulb Drain

For a Jackson-Pratt (JP) or Blake drain

When you go home, you may have drains still in place. You will have a Jackson-Pratt (JP) or Blake self-contained drainage system. This handout explains how to care for your drains at home until your health care provider takes them out.

Your closed bulb drain helps your wound heal because it drains fluid away from your surgical site. This helps keep blood and body fluids from building up under your skin and causing swelling.

The drainage tube goes through your skin near your surgical incision. It is held in place by a stitch (suture).

While you have the drain:

- You will need to change your dressing (bandages) at these times:
 - If you have an antimicrobial **disk** (BioPatch or Tegaderm), change the dressing on day 7 (see “How to Change Your Dressing” on page 3).
 - If you are using **gauze and tape**, change the dressing around the tube once a day (see “How to Change Your Dressing” on page 3).
- Empty the bulb/collection container at least 2 times a day (morning and before bedtime). Empty it more often if needed, whenever it is $\frac{1}{3}$ full.
- When you empty less than 30 cc of drainage from the bulb/collection container in two 24-hour periods, for 2 days in a row, call your health care provider. It may be time to remove the drain.
- Keep the area where your drain leaves your body clean and dry.

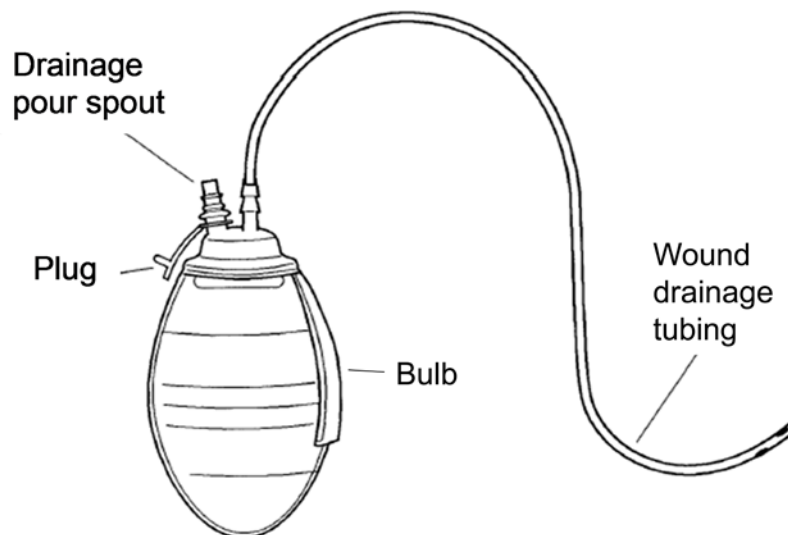
How to Empty Your Drain

Empty your drain at least 2 times every day, or whenever it is $\frac{1}{3}$ full. Follow these steps:

- Wash your hands with soap and warm water.
- You will receive a measuring cup when you leave the hospital. Use this to measure your drainage. Record the drainage amount on the record sheets (see “Record for Drain 1” and “Record for Drain 2” on pages 5 and 6).

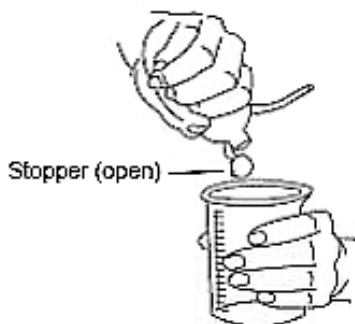


Wash your hands well with soap and warm water before and after you empty your drain.



The parts of the closed bulb drain.

- Loosen the safety pin(s) or clip that holds the drain tubing to your clothing.
- Strip the tubing if your doctor or nurse has told you to (see “How to Strip Your Drain” on page 4).
- Clean the plug and spout with an alcohol wipe.
- Open the plug on the drain.
- Turn the drain collection container upside down over the measuring cup. Gently squeeze the bulb to empty it into the cup. (See the top drawing on the left side of the page.)
- Clean the plug and spout again with an alcohol wipe.
- Squeeze the bulb flat with your hand. (See the bottom drawing on the left side of the page.) Put the plug back into the spout.
- Never squeeze the bulb after you have put the cap back in place. This can push the drainage back into your wound.
- Look on the side of the measuring cup to see how much fluid you drained. Write this amount, in milliliters (mL), on your drainage record sheet. If you have more than one drain, label them 1 and 2.
- Check the drainage for color and smell. If it smells bad, call your clinic or the doctor on call if your clinic is closed.
- Empty the drainage into your toilet and flush.
- Pin or clip the drain bulb back onto your clothing.
- Wash your hands with soap and warm water.



Turn the drain collection container upside down over the measuring cup. Gently squeeze the bulb to empty it.



Squeeze the bulb flat with your hand before you replace the plug.



A Jackson-Pratt drain

Drawing used with permission from Truven Health Analytics.

How to Change Your Dressing

If you have an antibacterial disk and occlusive dressing (such as Biopatch and Tegaderm):

Remove your dressing and the disk 7 days after you leave the hospital. Remove the dressing and disk before then if your dressing gets wet or dirty. The disk will swell if your dressing gets wet.

- Use your best judgment to decide whether the disk is wet or not. Also look for moisture that may collect under the dressing from sweat. Call your provider if you are not sure if you need to change the dressing.
- Leaving the disk on your skin too long when it is wet may cause skin problems.

When you change your dressing:

- Carefully remove the clear plastic tape and disk at 7 days. Do not pull on the tube. You will see a stitch holding the tube in place.
- Do **not** use scissors around the tube.
- After you remove the disk, change your dressing every day until your follow-up visit. Use dry gauze as the dressing when you change it.

If you have a gauze and tape dressing:

Change your dressing once every day, or more often if your dressing gets wet, dirty, or if the JP insertion site is oozing. To change the dressing:

- Gather and prepare supplies:
 - Tape
 - Slit gauze (such as drain gauze) or 2 pieces of gauze folded in half to put around the drain where it goes into your skin
- Wash your hands with soap and warm water.
- Loosen the tape and remove the old dressing from the drain site. Check for any redness or bad smell. It is best to change your dressing after you shower.
- Use warm soapy water and a washcloth or cotton ball to clean around the tube. Use unscented soap that does not contain oils. Let your skin dry completely.
- Remove the slit gauze from the package (or use 2 pieces of folded gauze). **Touch only the edges** of the gauze and place it on your skin around the tube.
- Tape the gauze in place. Try not to put the tape on the tube itself.

Supplies You Will Need

- Measuring cup (you will get this in clinic or when you leave the hospital)
- Alcohol wipes (for cleaning Jackson-Pratt stopper and for stripping your drain)
- 2-inch x 2-inch gauze pads
- AquaGuard or other plastic wrap
- Paper tape

Showering

- Do **not** take a bath, sit in a hot tub, or go swimming while you have the drain.
- You may shower after you have had the drain in place for 48 hours, after you have removed your outer surgical dressing (if you have one), or if you do not have an outer dressing.
 - To keep your drain in place in the shower, attach it to a lanyard or shoelace looped loosely around your neck.
 - Protect your dressing as much as possible from getting wet. Cover it with plastic wrap and tape the edges to your skin to make it waterproof. If your dressing gets wet, remove it after the shower. Let your skin dry completely and then change your dressing.
- To keep the drainage tube from falling out, do not let the drain hang loosely. Hold the drain in one hand or place it somewhere near you where it will not fall. You may need help in the shower.
- You may take a bath **after** the drain is removed, your skin has healed, **and** there is no more drainage from the site.

How to Strip Your Drain

Stripping your drain will keep it from clogging. If your doctor or nurse has told you to strip your drain:

- With one hand, wrap an alcohol wipe around the tubing near your dressing.
- With your other hand, keep the tubing in place by holding it firmly between your dressing and the alcohol wipe.
- With your first hand, squeeze the section of the tubing covered by the alcohol wipe. Keep this pressure while sliding the wipe down the tubing to the bulb, and then let go.

After Clinic Hours

If you are concerned for any reason and the clinic is closed, please call 206-598-6190. Ask for the Resident doctor on call for your Attending doctor to be paged.

When to Call the Clinic

Call the clinic if:

- You have redness, swelling, or drainage at your incision or drain site.
- Your bulb/collection container refills with blood or drainage right after you empty it.
- You have more pain than usual, or your pain is not eased by your pain medicines.
- Your drain bulb will not stay compressed.
- Your drainage is cloudy or has a bad smell.
- The tube falls out.
- The suture comes out.
- You have a fever higher than 100.5°F (38.5°C).

Record for Drain 1

Day	Time	Amount	Color	Smell

