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اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723553 تماس بگیرید.

ਜੇ ਤੁਹਾਨੂੰ ਤਰਜਮੇ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ ਫੋਨ ਕਰੋ: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

Se precisa de uma tradução por favor contacte: 01932 723553

আপনার অনুবাদের দরকার হলে এখানে যোগাযোগ করুন : 01932 723553

यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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Ashford, Middlesex
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Tel: 01932 872000

Website: www.ashfordstpeters.nhs.uk

Breast Patients discharged with Exudrain

Breast Clinic



Further Information

We endeavor to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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Department: Breast Clinic

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Contact Numbers

After discharge, should you have any concerns or queries, please contact the Breast Care Nurses during office hours.

Telephone numbers of Breast Care Nurses are:

Ashford Hospital direct	01784 884411
St. Peter's Hospital direct	01932 722771
Via switchboard	01932 872000 bleep: 5129

At evenings and weekends direct telephone number of the ward:

Dickens Ward	01784 884004 / 884574
Kingfisher Ward	01932 722380 / 722564

Details regarding our hospitals, including information regarding the department caring for you can be found by logging on to our website www.ashfordstpeters.nhs.uk or the National NHS website www.nhs.uk which includes an A to Z guide to health.

Breast Patients discharged with Exudrain

Introduction

Following surgery to the breast and / or under the arm, a wound drain may be inserted. This helps to prevent fluid from collecting and causing swelling thereby reducing the risk of infection. It also helps in reducing any bruising to the area.

The drain is removed when the amount draining is less than 25 mls per 24 hours or after seven days, whichever is sooner. In some situations the drain is left for a longer period of time. The drain is usually removed by the breast care nurses or occasionally we may arrange this to be done through your district nurses.

You will be advised to bring a specific bag in which to keep your drain. This can be attached to your waist with a belt.

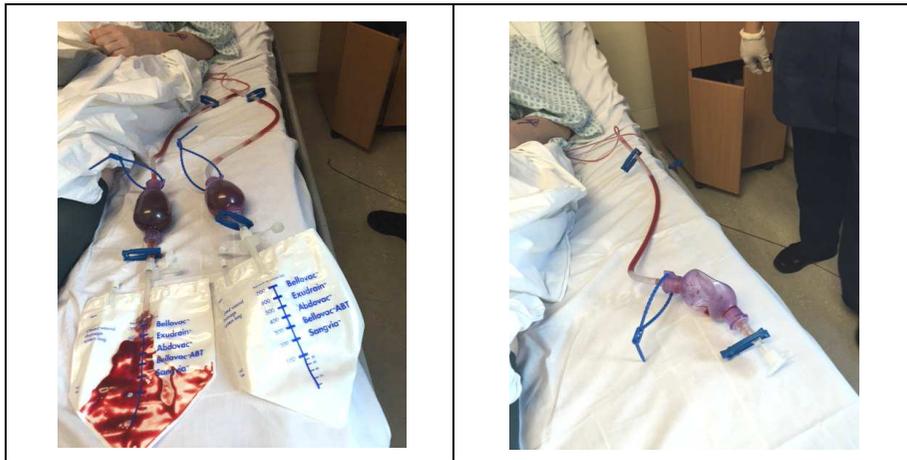
Emptying the drain

During your hospital stay, your 24-hour drain output is measured; this is done by squeezing the bulb to empty the fluid into a measuring jug.

On discharge, you will be advised to measure the drain output at a time that is convenient for you, e.g. every morning. What is important is that the 24-hour output is measured at roughly the same time each day.

You will be provided with a measuring jug, a syringe and some antiseptic wipes. Your nurse will show you how to empty the bulb and measure the drainage. The drain is removed when the

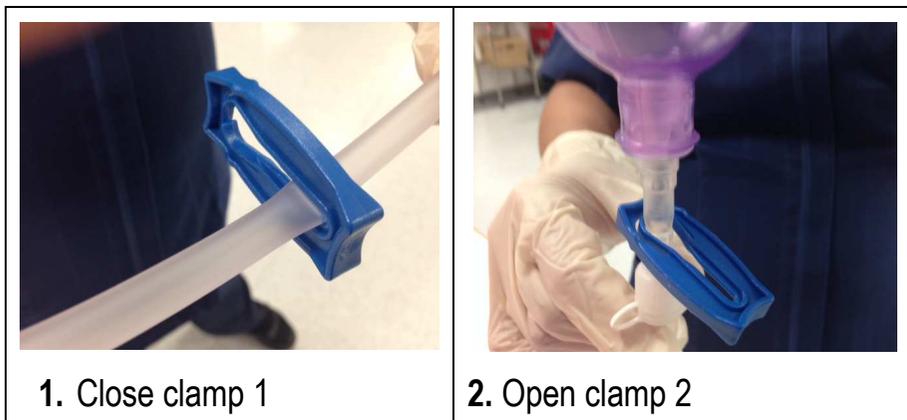
drainage is clear and the output is equal to or less than 25mls in 24 hours. Your Breast Care Nurse will advise you if the drain needs to stay longer.



Emptying the bulb into the main bag

Immediately after the operation, the bulb is connected into the main bag. This will facilitate possible large amount of drainage to collect into the main bag. You can keep this bag overnight and disconnect in the morning.

You need to follow these simple steps:



1. Close clamp 1

2. Open clamp 2

Drain Logbook

Day after Operation Amount drained per 24 hours (mls)

1.
2.
3.
4.
5.
6.
7.

Please see animated video link on this website:

<http://www.wellspect.co.uk/Downloads-and-videos/Product-information/Abdovac-Exudrain-animated-user-instructions>

Note: You may need to empty the bulb more than once in the next few days after the operation. Drain needs to be emptied and suction re-activated if you notice the bulb fully expanded.

Removal of the Drain

Before you are discharged from hospital, a plan will have been put in place for removal of the drain once the volume of drainage has reduced. This is usually arranged with a breast care nurse or, if appropriate, the ward nurses will make the necessary referral for the District Nurse to visit you at home.

Contact the breast care nurses if:

- The area around the drain site feels swollen or warm
- The breast / chest or under the arm on the operation site feels swollen or warm
- The drainage tubing has been pulled out so that the holes in the tubing are showing. This may be noticed by you because the bulb keeps feeling with air, but little fluid is draining
- The amount of fluid draining each day is increasing rather than decreasing
- The fluid suddenly seems to stop draining altogether



3. Squeeze the bulb to empty the fluid into the main bag



4. With bulb squeezed, close clamp 2



5. Open clamp 1



6. Un-screw the main bag and seal it with the cap



7. Measure output from the bag
8. Pour fluid down the toilet and put bag inside a plastic bag in the normal waste



4. With bulb squeezed, close clamp 2



5. Open clamp 1

Emptying the bulb and Reactivating Suction

1. Do steps 1 and 2. (See Page 4)



2. Squeeze the bulb to empty the fluid into the jug provided



3. Wipe off any blood from the tip and apply the cap



6. Measure output and document amount and colour in the drain logbook at the end of this leaflet. Use syringe provided to measure smaller output.
7. Pour fluid down the toilet