

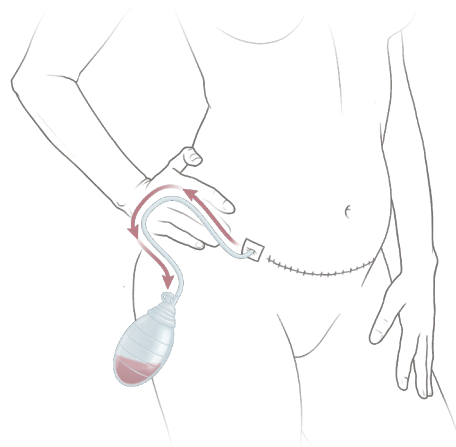
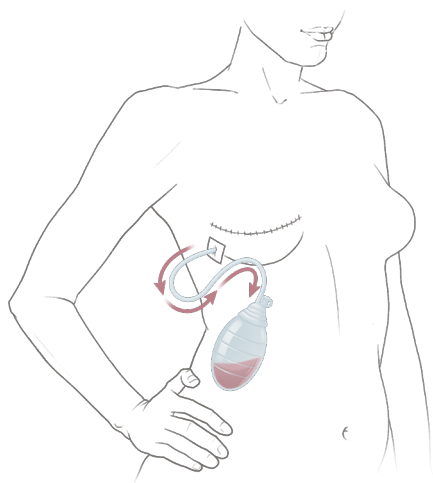


*Healing takes courage,
and we all have courage,
even if we have to dig a little to find it.*

– TORI AMOS

Drain Care

Post-surgical drains may not be convenient, but they are a vital part of your healing after breast reconstruction. Our simple instructions will walk you through the process of caring for your drains.



FRIEDMAN CENTER
FOR BREAST AND LYMPHATIC SURGERY

| *feel whole again* |

Overview

After your breast surgery, one or more Jackson-Pratt (JP) drains will be placed at the surgery site to keep fluid from building up under your skin. You'll need to "milk" the drains to prevent clots from forming. You'll also need to empty your drains and measure and record the amount of fluid that's collected in the drain bulb. When the fluid in the bulb has decreased to a certain amount, the drains can come out.

Caring for Your Drains

Fluid buildup needs to be drained from the surgical site to help you heal and to make you more comfortable. For the first 3-4 days after surgery the fluid will be bloody. After that, it will become paler and the flow will slow down.

Drains give bacteria a way to enter your body. You'll need to apply a small amount of Polysporin, or a generic version of Polysporin, to the insertion site (where the drain enters your skin) every day. You won't be able to take showers while the drains are in place, but you can have sponge baths.

The type of drainage system usually placed after mastectomy is the Jackson-Pratt (JP) drainage system. In the JP system, drains are attached to tubing that's fastened to your skin with one or two stitches. Fluid flows through the tubing into a plastic bulb. To keep the drains from pulling on your skin, attach them to your clothing with a clip or a safety pin.

Emptying the Drains

Once you've left the hospital, you'll need to empty the drains twice a day, in the morning and the evening. When you do that, you'll need to measure and record the amount of fluid in the bulbs as well as the time you emptied them. You can record the information on the drainage chart at the back of this packet.

Here's how to empty a drain:

1. Wash your hands with warm water and soap.
2. Detach the drainage bulb from any bra or wrap it may be connected to.
3. Unplug the stopper on the bulb.
4. Pour the fluid from the drain into a measuring cup.
5. Squeeze the air out of the bulb and put the plug back in.
6. Record the color and amount of fluid on your drainage chart. Be sure to log the fluid for each drain separately.
7. Flush the fluid down the toilet.
8. Reattach the drain to your bra or wrap. Make sure that it is secure.

Milking the Drains

To keep the drains and tubing from clogging, you'll need to milk the drains. You should do this before you open the bulb plug to empty and measure the collected fluid. You should also do this if you notice fluid leaking around the insertion site or if you see clots in the tubing. Fluid will begin draining bright red and eventually turn to a lighter pink color.

Here's how to milk the drain:

1. Wash your hands with warm water and soap.
2. Pinch the tubing with your thumb and index finger close to the insertion site. Keep pinching the tubing while you milk the drain to make sure you don't tug on your skin.
3. Using the thumb and index finger of your other hand, pinch the tubing just below your other thumb and index finger. Slide the lower thumb and index finger down the tubing, pushing any clots toward the bulb. Using an alcohol wipe can help your thumb and finger to slide easily.
4. Slide your thumb and index finger down the tubing as many times as you need to push clots into the bulb. If you can't move a clot into the bulb and there is little or no fluid flow, call your doctor or nurse.

When Can Your Drains Come Out?

The drains will need to stay in for at least 5 days and up to 3 weeks. A drain can come out when the drainage in the bulb is about 2 tablespoons over 24 hours for 2 days in a row.

It's important that you log your drain output everyday. Here's an example of what a drain log looks like. A blank drain log can be found at the back of this packet or at friedmancenter.com/drain-log.

Date: <i>September 5</i>				
Time of Day	Drain 1 Fluid Output	Drain 2 Fluid Output	Drain 3 Fluid Output	Drain 4 Fluid Output
<i>8 am</i>	<i>40</i>	<i>35</i>	<i>40</i>	<i>40</i>
<i>12 pm</i>	<i>35</i>	<i>15</i>	<i>30</i>	<i>35</i>
<i>4 pm</i>	<i>20</i>	<i>20</i>	<i>20</i>	<i>25</i>
<i>8 pm</i>	<i>20</i>	<i>15</i>	<i>20</i>	<i>10</i>
Total Fluid Output cc:	<i>115</i>	<i>85</i>	<i>110</i>	<i>110</i>

Things to Watch Out For

If you have any of the signs listed below, call your nurse or doctor. If you have them on a weekend or at night, go to the nearest urgent care center or emergency room and tell them you've had breast surgery.

- Fever >100.4 degrees
- Pus coming out of the surgical or insertion site
- Foul-smelling drainage
- Red skin around the surgical or insertion site
- Bleeding that doesn't stop at the surgical site
- Nausea that doesn't stop
- Vomiting that doesn't stop

Sometimes drains can fall out. This isn't a cause for alarm. Call your nurse or doctor. If it happens at night or on a weekend, there's no need to go to an urgent care center or emergency room. Wait until your doctor's office opens and call them then.

*We're here to support you in every way possible.
Find more valuable patient information in our
Resource & Support Center.*

friedmancenter.com/resource-support-center

Drain Log

Patient Name _____

Date of Surgery _____ / _____ / _____

Fluid Output

RECORD IN CC

4 ounces (1/2 cup) = 120cc

2 ounces (1/4 cup) = 60cc

1 ounce = 30cc

1 tablespoon = 15cc

1 teaspoon = 5 cc

Date:				
Time of Day	Drain 1 Fluid Output	Drain 2 Fluid Output	Drain 3 Fluid Output	Drain 4 Fluid Output
Total Fluid Output cc:				

Date:				
Time of Day	Drain 1 Fluid Output	Drain 2 Fluid Output	Drain 3 Fluid Output	Drain 4 Fluid Output
Total Fluid Output cc:				

Date:				
Time of Day	Drain 1 Fluid Output	Drain 2 Fluid Output	Drain 3 Fluid Output	Drain 4 Fluid Output
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