8. ULTRASOUND GUIDED THORACENTESIS

1. Patient must have coagulation factors <5 days old, more recent if on or recently dc’d blood thinners. Check for HCT, PLT, INR, PT, PTT is only drawn if patient is on heparin.
2. Must have Doctor’s order to indicate: a) Diagnostic thoracentesis-drain as much fluid as possible and send to laboratory and/or pathology for specific test. Dr’s order must reflect what lab tests are desired; b) Therapeutic thoracentesis-drain as much fluid as possible, lab tests are not necessary.
3. For outpatients, prepare appropriate laboratory and/or pathology specimen order sheet as necessary, indicating lab tests desired, make a copy of the doctors order for lab and/or pathology; prepare a reprint of admissions sheet for lab and/or pathology. The laboratory/pathology sheets are not necessary for inpatients, as these orders are prepared by the nursing floor. Prepare consent form for signature.
4. Patient to exam room, for initial procedure, order a Chest/Pleural Sonogram/Thoracentesis PNL; subsequent thoracentesis’ procedures generally do not need the chest/pleural order.
5. Briefly image posterior chest, indicating side, to determine best access, and if fluid is loculated or complex.
6. Set up Thoracentesis tray, adding sterile gloves, prep stick, 18 and 25 gauge needle, 10cc syringe, buffered lidocaine, One Step 19 gauge needle set, Vacutainers, chemistry tubes, bandaid.
7. Have radiologist sign consent form.
8. Notify X-Ray department of patient and the need for post thorocentesis chest x-ray. Escort patient to x-ray department following thoracentesis.
9. Complete all necessary forms. Prepare specimen receipt/tracking form for lab to initial, keep the specimen receipt form with the registration paperwork, scan into PACS with consent form.