Mission Plastic Surgery

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How to Care For Your Jackson Pratt Drains

Sometimes it is necessary to place a drain(s) into the incision site during surgery. This helps remove fluids that accumulate after surgery. The drain (Jackson Pratt or "J.P."), provide a suction and collects excess fluid, while promoting the healing process and reducing the change of an infection.

- 1. Remove the plug attached to the bulb. This will cause the bulb to expand with air, making it easier to measure and empty out.
- 2. There are lines marked on the bulb. The bulb can hold up to 100cc of fluid. Measure and record the amount of drainage from your J.P. drain bulb every 12 hours or as needed as it fills up. This is done by estimating the amount from the lines on the bulb. Alternatively, if you have a small measuring cup in milliliters, you can empty the contents of the bulb into the cup to measure the amount of fluid. (Drainage into your J.P. bulb should not exceed ¾ full to maintain maximum suction). Record every measurement on the sheet provided to you. Bring it with you to each of your follow-up visits. (To help prevent infection, do not allow the rubber plug or bulb to touch the measuring cup or any other surface while emptying.)
- 3. Carefully discard the fluid into the toilet, be sure not to splash any onto you or others.
- 4. Once empty, compress the bulb while replacing the plug to create a vacuum so that the bulb is in suction mode.
- 5. If the drain should accidentally partially come out of the incision site, do not push it back in. It is now contaminated and can cause infection. Just call our office if this should happen. Place extra gauze or a sanitary napkin to absorb any leakage. No need to panic.
- 6. Requesting to remove a drain before it is ready to come out may cause a seroma that will need to be manually aspirated with a needle. Drains will be removed once they are draining less than 40cc in a 24 hour period per drain.
- 7. Always wash your hands after handling drainage.

<u>IMPORTANT</u> You must remain on antibiotics while your drains are in. If you run out of antibiotics, please request a refill. Not doing this could cause infection.

Call our office if any of the following should occur:

- The tube is clogged
- Increased pain, swelling, heat, redness or burning around the insertion site
- Fluid is thick, has a foul smell, looks like pus (It is normal for it to be bright red the first few days after surgery. It should get lighter after a few days to a serous clear or pink color.)
- Have a fever that won't resolve

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Please note the drain number or side (left or right, etc) drains should be marked.

Date:	Time:	Drain #1	Drain#2	Drain#3	Drain#4
Example: 8/02	7:00 a.m.	<u>60cc</u>	<u>70cc</u>		