

Caring for Your Jackson Pratt® Drainage System

This booklet was originally written by Barbara Cree-Loveless, RN and Cynthia Knauer, RN, MS

Introduction

This booklet describes how to care for your Jackson Pratt® drainage system after you leave the hospital. It is a review of the practice you will do with your nurse. The Jackson Pratt is easy to use, and once you have been shown how, you will be able to care for it yourself.

The Jackson Pratt system has a soft plastic bulb with a stopper. A catheter is attached. The drainage end of the catheter is inserted near your incision. When the bulb is compressed with the stopper in place, a vacuum is created. This causes a constant gentle suction, which helps draw out fluid that collects under the incision. To achieve the best healing results, the bulb should be compressed at all times except when you are emptying the drainage.

We cannot tell you how long you will have the Jackson Pratt. It depends upon your surgery and the amount of drainage you are having. Drainage is very individual. Some people drain a significant amount, some only a little. The Jackson Pratt is removed when the drainage is less than 30 cc for 24 hours. If you have more than one drain, you will empty and record the amount of drainage in each one. The drainage in each must be less than 30 cc for 24 hours. Your doctor or nurse will decide when to remove it. To make this decision, they will need to see your Jackson Pratt Drainage Record. It is on pages 5 and 6. Bring it with you when you have follow-up appointments.

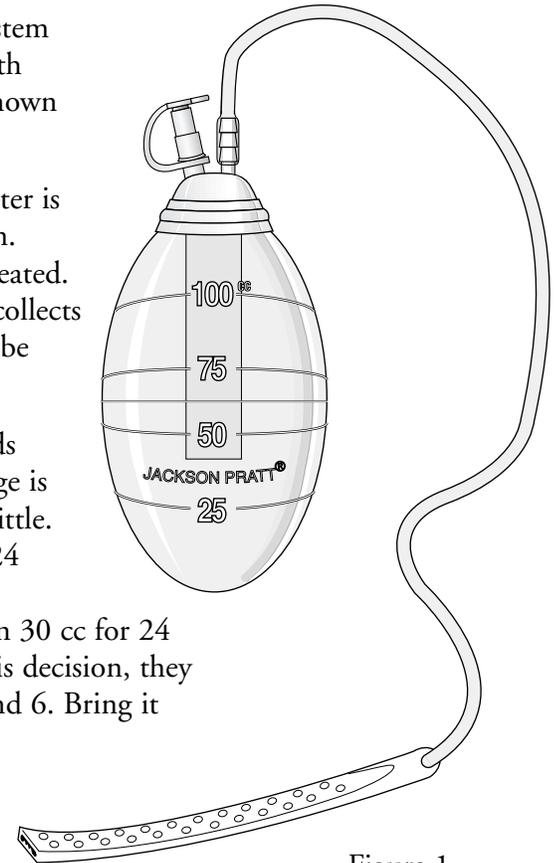


Figure 1

Caring for Your Jackson Pratt at Home

Caring for your Jackson Pratt at home will involve the following:

1. Milking the tubing to help move clots.
2. Emptying it twice a day and recording the amount of drainage on the Jackson Pratt Drainage Record.
3. Caring for your insertion site, the area where the catheter enters your skin.
4. Recognizing when there is a problem.
5. If you have more than one drain, make sure to measure and record each one separately. Do not add them together.

Milking the Tubing

These steps will help you move clots through the tubing and promote the flow of drainage. Do this before you empty and measure your drainage.

1. Wash your hands thoroughly with soap and water. Dry them thoroughly.

2. Look in the mirror at the tubing. This will help you see where your hands need to be.
3. At the point closest to the insertion site, pinch and hold the tubing between the thumb and forefinger of one hand.
4. With the thumb and forefinger of your other hand, pinch the tubing right below your other fingers. Keeping your fingers pinched; slide them down the tubing as far as they will reach. If there is still tubing between the fingers of your lower hand and the bulb, keep the lower fingers pinched and release your upper fingers. Pinch the tubing right below the fingers of your lower hand. Slide them down the tubing as far as they will reach. Repeat until you reach the bulb. You may want to use alcohol swabs provided by your nurse to help you slide your fingers down the tubing easier.
5. Repeat steps 3 and 4 as necessary to push clots from the tubing into the bulb. If you are unable to move a clot into the bulb, call your doctor's office. The phone number is on page 7.
6. The fluid may leak around the site if a clot is blocking the drainage flow. If there is fluid in the bulb and no leakage at the site, then the drain is working in spite of what appears to be a clot.

How to Empty Your Jackson Pratt and Record the Drainage

You will need to empty your Jackson Pratt in the morning and in the evening.

Equipment Needed:

- Measuring container given to you by your nurse.
- Jackson Pratt Drainage Record on pages 5 and 6.

Steps To Follow:

1. Prepare a clean area on which to work and gather your equipment.
2. Wash your hands thoroughly with soap and water. Dry them thoroughly.
3. Unplug the stopper on top of the Jackson Pratt. This will cause the bulb to expand.
4. Do not touch the inside of the stopper or the inner area of the opening on the bulb.
5. Turn the Jackson Pratt upside down, gently squeeze the bulb, and pour the contents into the measuring container (Figure 2).
6. Turn the Jackson Pratt right side up.
7. Squeeze the bulb until your fingers feel the palm of your hand.
8. Continue to squeeze the bulb while replugging the stopper.
9. Check to see that the bulb remains fully compressed to assure a constant gentle suction.
10. Pin the collar of your Jackson Pratt securely to a piece of your clothing or feed it through the Velcro® straps attached at the bottom of your surgical bra, if you have one. Do not let the drain dangle. A “fanny pack” or belt bag may be helpful to hold the drain.

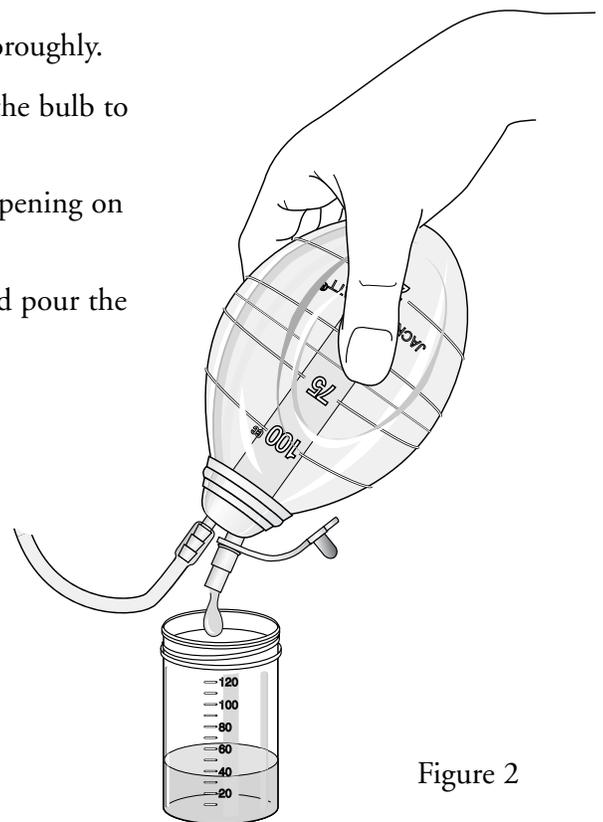


Figure 2

11. Check the amount and color of drainage in the measuring container.
12. Record this amount and the color on your Jackson Pratt Drainage Record.
13. Empty the drainage down the toilet and rinse the measuring container with water.
14. At the end of each day, add the total amount of drainage for the 24-hour period and record it in the last column of the drainage record.
15. If you have more than one drain, measure and record each separately.

Caring for the Insertion Site

Once you have emptied the drainage, wash your hands again. Check the area around the catheter insertion site. Look for tenderness, swelling, or pus from the insertion site. If you have any of these or a temperature of 101° F (38.3° C), you may have an infection. Call the doctor or nurse. Sometimes the drain causes redness the size of a dime at the insertion site. This is normal. Your doctor or nurse will give you instructions if a dressing should be placed over the insertion site.

Problems You May Encounter with Your Jackson Pratt

Problem:

The bulb is not compressed.

Why?

- The bulb was not compressed completely because it wasn't squeezed tightly enough.
- The stopper is not closed securely.
- The suction catheter has been dislodged and is leaking.

What To Do.

- Compress the bulb using steps 2, 3, 4, 7, and 8 outlined in “How to Empty Your Jackson Pratt and Record the Drainage” on page 2.
- If the bulb remains expanded after following the above steps, notify your doctor or nurse during business hours.

Problem:

There is:

- No drainage.
- A sudden decrease in the amount of drainage.
- Drainage on or outside the catheter dressing.

Why?

Sometimes “string-like” clots clump in the catheter. This can block the flow of drainage.

What To Do.

- Milk the tubing as described on pages 1 and 2.
- If there is no increase in drainage flow, notify your doctor or nurse during business hours. If it occurs at night, call them the next day.

Problem:

The Jackson Pratt catheter falls out from the insertion site.

Why?

This rarely happens because the catheter is held in place with sutures. It can occur if the catheter is pulled.

What To Do.

If this does occur, place a fresh dressing over the site and call your doctor or nurse during business hours.

Problem:

You have redness greater than the size of a dime, swelling, heat, or pus around the catheter insertion site.

Why?

These may be signs of an infection.

What To Do:

- Take your temperature. Call your doctor or nurse to tell them of the signs around the insertion site. Let them know if your temperature is 101° F (38.3° C) or higher.
- Keep the insertion site clean and dry by washing it with soap and water and then gently patting it dry.

Once you and your nurse believe that you know how to care for your Jackson Pratt, you will do it on your own. Your nurse will supervise you the first time you empty the drainage to make sure you are doing it correctly. Even after you have begun to care for it yourself, we are always here to help. If you encounter any problems after discharge, call your nurse or your doctor.

Call Your Doctor or Nurse Right Away If You Have:

- Bright red drainage.
- A fever of 101° F (38.3° C) or higher.
- Increased redness, tenderness, swelling, or pus at the catheter insertion site.

Call Your Doctor or Nurse During Business Hours If:

- The amount of drainage suddenly drops or increases 100 cc over the last 24 hours.
- The catheter falls out.
- You cannot compress the bulb.

Instructions After the Drain is Removed

After your drain is removed, please follow the instructions below. These guidelines are intended to help you:

- Keep the area where the drainage system entered the skin clean and dry.
- Prevent infection and promote healing of the skin after drain removal.

Instructions:

1. Remove the dressing after 24 hours.
2. You may shower (no tub bath) after you have removed the dressing.
3. Wash the site gently with soap, letting warm running water to rinse the area.
4. Pat the area dry.
5. Inspect the site (using a mirror if necessary). You can expect the following:
 - Slight redness
 - Swelling
 - Tenderness
 - A small amount of clear or slightly bloody drainage on the gauze pad
6. Call your doctor if you have any questions, or if you notice:
 - Increased redness
 - Increased pressure (swelling)
 - Skin that is hot to the touch
 - A body temperature above 101° F (38.3° C)
7. Arrange a follow-up visit with your doctor or nurse in _____ days.

Telephone Numbers

Doctor _____ Daytime Telephone Number _____

Nurse _____ Telephone Number _____

After 5 pm and on weekends, call (212) 639-7900 and ask for the doctor covering your service.



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