8. ULTRASOUND GUIDED THORACENTESIS

- 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.
- 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.
- 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.