

The ROYAL MARSDEN

NHS Foundation Trust

Going home with a redivac drain

Breast Unit

Patient Information



NHS

Contents

| | |
|---|----------|
| What is a redivac drain? | 1 |
| Why do I need a redivac drain? | 1 |
| How long does the drain stay in place? | 2 |
| How do I measure the drainage in the bottle? | 2 |
| Written record of the amount of fluid in your drain | 3 |
| Will I have to change the drainage bottle? | 3 |
| Problem solving | 3 |
| What should I do if the tubing disconnects? | 3 |
| What should I do if the vacuum is lost on the drainage bottle? | 4 |
| What should I do if the drainage tube is accidentally pulled out? | 4 |
| How do I care for my wound and dressings? | 5 |
| What equipment will I take home with me? | 5 |
| What happens when the redivac drain is removed? | 5 |
| Is there anything I need to look out for after my drain has been removed? | 5 |
| Helpful tips and things to remember | 6 |
| When do I need to seek help or advice from the hospital? | 7 |
| Contact details | 8 |

What is a redivac drain?

A redivac drain consists of a length of tubing, which is put into the operation site during surgery and secured in place with one stitch. It is attached to a collection bottle, which has a vacuum, and gently draws fluid out of the wound. This booklet explains how to look after your drain when you go home after your surgery.

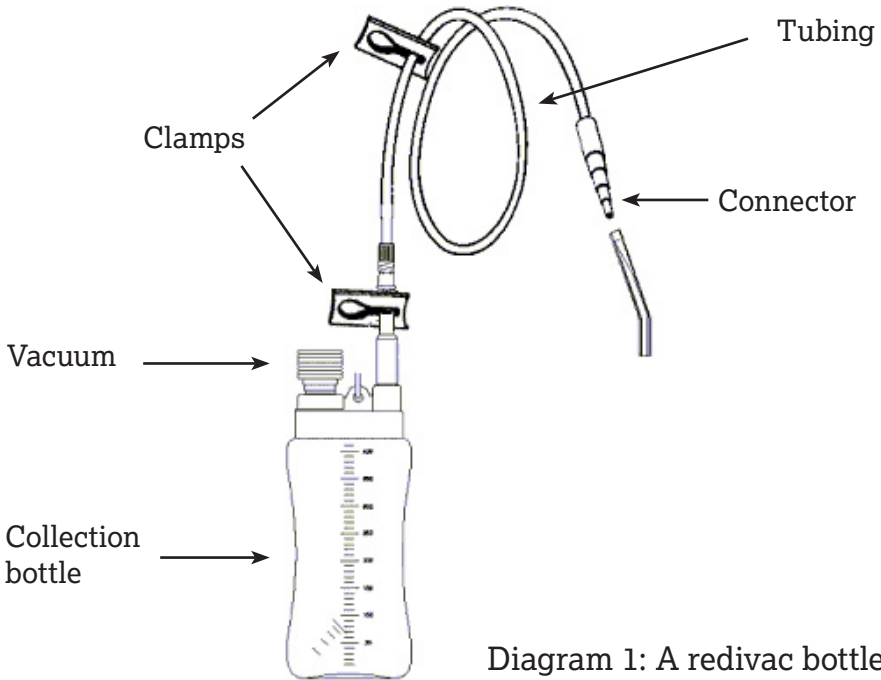


Diagram 1: A redivac bottle

Why do I need a redivac drain?

A redivac drain is used to prevent blood and fluid collecting following an operation. The surgeon puts in wound drains (tubes) with drainage (vacuum) bottles to remove excess fluid produced at an operation site following an operation which encourages healing. The drains may stay in for several days, however, you will be able to go home with your drain(s) in place.

How long does the drain stay in place?

The length of time the drain stays in place depends on the amount of fluid drained.

If the drainage is 50mls or less in a 24 hour period, then a healthcare professional may remove the drain. Otherwise, the drain will usually be removed within seven days of the operation. Your surgeon will specify this in your operation note which you can ask your nurse to check before you go home.

How do I measure the drainage in the bottle?

- Mark the bottle once a day to show the level of drained fluid collected. Try to do this at the same time every day (for example, after breakfast).
- Place the bottle on a hard, flat surface and draw a line (with pen) where the fluid is on the side of the bottle (see diagram below).
- Each line is 10 millilitres (mls).
- Write the date and time (for example, 18.07.2019 – 8am, 100mls) next to the mark.



Diagram 2: Drain markings – there will be a strip of white tape alongside the markings for you to mark the level of the fluid

For example: 18.07.2019,
100mls

Written record of the amount of fluid in your drain:

| Day | Total amount drained (mls) | Amount drained in the last 24 hours (mls) |
|-----|----------------------------|---|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |

Will I have to change the drainage bottle?

You may have to change the bottle if the drain loses its vacuum or if the bottle becomes full.

It is very simple to do and we can teach you or a relative/friend to do this.

Problem solving

What should I do if the tubing disconnects?

Sometimes the drainage system becomes disconnected at the connector site (see diagram 1). If this happens, wash your hands, wipe the end of each tube with an alcohol wipe (provided) and firmly push the tubing back in place.

Check that the drainage bottle still has its vacuum. You can check if the vacuum on the drainage bottle has been lost by looking at the green concertina part of the drain. If it is no longer tightly closed, the vacuum is lost (see diagram 3B). You may also hear a loud hissing noise.

What should I do if the vacuum is lost on the drainage bottle?

First, change the bottle to a new one. If the vacuum is lost again please call the ward or site practitioner for advice.

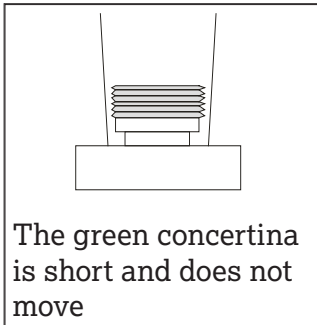


Diagram 3A Vacuum present

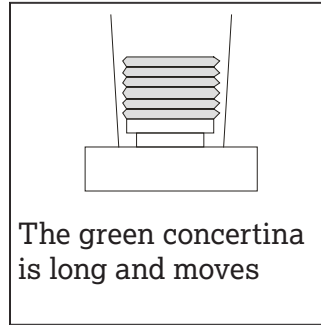
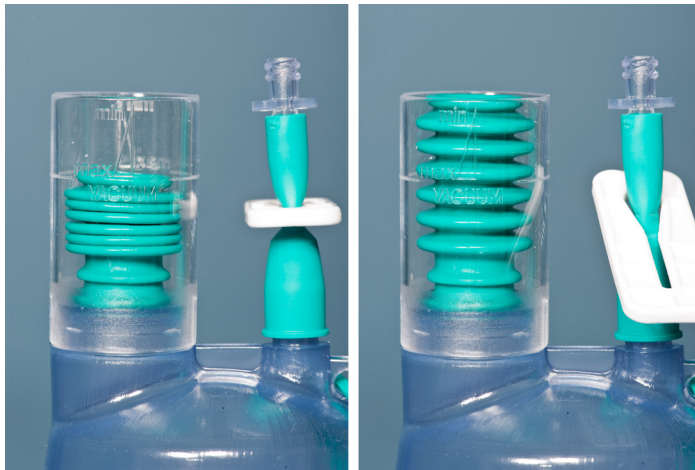


Diagram 3B Vacuum lost



What should I do if the drainage tube is accidentally pulled out?

Occasionally, the drainage tubing may get caught and the drain completely pulled out. If this happens, wash your hands and apply pressure to the wound with dry sterile gauze. Put on another dry dressing and contact the ward or site practitioner.

How do I care for my wound and dressings?

- The ward team will supply you with extra dressings when you go home. If the dressing covering the drain comes off, put on another one.
- You can have a shower but ensure that the dressing around the drain site does not get wet. If it does, change it afterwards. Sit the bottle on a chair or stool beside the shower, to ensure that the tubing does not pull on your wound.
- It is not advisable to have a bath.

What equipment will I take home with me?

- Spare dressings
- Alcohol wipes
- Supply of redivac bottles

N.B. you will not be able to get further equipment when you are back at home.

Please bring any unused bottles back at your follow up appointment.

What happens when the redivac drain is removed?

Your drain will be usually be removed by a community nurse. Removing the drain is a simple procedure that is usually painless. First we release the vacuum, then we take out the stitch holding the drain in place and remove the tube. Your wound dressing may be changed when the drain is removed. If it is not possible to arrange a community nurse to remove the drain, please contact the ward for advice.

Is there anything I need to look out for after my drain has been removed?

A collection of fluid, called a seroma, may develop under the wound after the redivac drains have been removed. This is very common. Your body will absorb a small amount of fluid

naturally over two to three weeks. However, if it is a larger amount and causes discomfort, you may need to have it drained. A member of your surgical team can drain it using a small needle and syringe; it is usually painless. This procedure may need to be carried out several times. If you notice any swelling and think you may have a seroma, you should contact the ward or site practitioner.

Occasionally, a haematoma (a collection of blood) can develop under the wound. If it is small, your body will eventually absorb the fluid naturally. If it is larger and causing you pain, you will need to be seen by a doctor.

Helpful tips and things to remember

- Remember to take the drain wherever you go.
- Try to avoid the tubing catching on anything.
- Always make sure the tube does not get kinked.
- Wear loose clothing to allow for the tubing. Some people have found it helpful to attach the bag containing the drainage bottle to a belt around their waist or carry it around in the small bag provided.
- When sleeping, place the drain upright on the floor beside you. This will stop you rolling onto the drain bottle when asleep.
- The bottle can get heavy which can sometimes be inconvenient and restricting. However, we would not change the bottle unless it became very full. This is because it can increase the risk of infection when the sterile seal is broken from the wound to the drainage bottle.
- Check that the bottle vacuum is present by checking the green concertina at the top of the bottle (see diagram 2A).

When do I need to seek help or advice from the hospital?

You should contact the ward immediately if:

- You have sudden swelling at the wound site that is causing you severe pain. This may be caused by a collection of blood developing under the wound or fluid that will not drain, for example, if the drain is blocked. You will need to be seen by a doctor.
- The dressing becomes stained heavily with blood or tissue fluid (it will be stained red/yellow).
- You have a temperature of over 37.5°C

Contact the ward the following day if:

- The drainage (the level that you mark on the bottle daily) is more than 100mls in 24 hours.
- The tubing disconnects or the bottle loses its vacuum – follow instructions on page 3.
- The drain is accidentally pulled out – follow instructions on page 4.

Contact details

If you or your carers have any queries or questions, you can contact:

Ellis Ward (Monday to Friday, 9am – 5pm)
020 7808 2385/2395

The Royal Marsden Macmillan Hotline: 020 8915 6899

You can ring the hotline 24 hours a day, 7 days a week.

Call us straight away if you are feeling unwell or are worried about the side effects of cancer treatments.

This service provides specialist advice and support to all Royal Marsden patients, as well as to their carers, and both hospital and community-based doctors and nurses caring for Royal Marsden patients.

Notes and questions

Notes and questions

References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre

Freephone: 0800 783 7176

Email: patientcentre@rmh.nhs.uk

No conflicts of interest were declared in the production of this booklet.

Should you require information in an alternative format, please contact The Royal Marsden Help Centre.



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