

HOW TO CARE FOR YOUR DRAINS

Fluid accumulation at surgical sites is a normal post-operative occurrence. Drains are placed at the time of surgery to allow fluid to exit the surgical site in a controlled sterile environment. A drain consists of a long tube that is partially inside the body and connects to a suction bulb. Drains may stay in place 1-4 weeks depending upon how much fluid your body produces. Every patient is different and therefore the length of time drains stay in place varies from person to person.

Although we are happy to answer questions you may have regarding your drain care; we ask that you review these instructions carefully before calling the office.

1. Measure the amount of fluid in the suction bulb. You may estimate using the bulb's markings. Simply remove the cap, squeeze the fluid out, replace the cap while squeezing the bulb as flat as possible. Bring the drain record to post-op appointments.
2. We will remove the drains in office at the appropriate time. Please do not remove them yourself.
3. You may **NOT** shower with the drains. They will be removed at the appropriate time at your post-operative office visit. You may have a round disk with a clear plastic dressing. Leave on until your next visit.
4. It is normal to have clots or string-like tissue in the drain tube. Sometimes the tube may get obstructed. Gently "Milk" the tubing 2-3 times a day to assist drainage. To do this hold the drains at the breast with one hand and gently pull "milk" down the tubing toward the drain bulb. If bandages soak from around the tube, this is normal. Just replace as needed.
5. The color of the drainage fluid varies. It is mostly bloody to begin then gradually yellow or clear. It may return to pink or dark-tinged blood. This happens occasionally.
6. If the bulb will not hold suction, just leave it in place. Chances are that the drain has slipped out a little. This is Not an emergency. Fluid may flow into and around the tube. Continue care as directed above and call the next office day for an appointment.
7. If the drain falls out: We Do Not Replace The Drain. Just clean the area as above and continue with gauze. Fluid will continue to drain out of the area. There may be some swelling. This is all normal.
8. Some patients experience pain at the drain site. The drain is stitched to the skin to secure it. It can become raw and tender. This will resolve when the drain comes out. You may use a topical anesthetic.
9. If the drain stitch breaks, you may tape the tube to your skin and pin the drain to your garment. If the tube slips out or suction does not hold; this is OK. **DO NOT TRY TO PUSH THE DRAIN BACK INTO THE BODY.** Continue cleansing and bandage and we will see you at your next appointment.

Photo of Drain.

