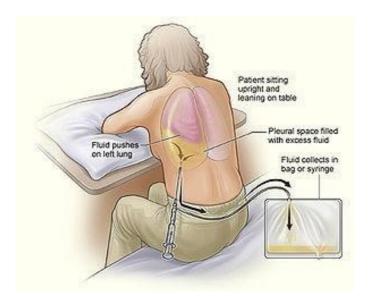


INFORMATION FOR PATIENTS UNDERGOING THORACENTESIs





Thoracentesis is indicated for the treatment of pleural effusion.

Before undergoing the procedure, a doctor will explain the purposes and methods of carrying out the procedure.

The procedure consists in introducing a needle into the thoracic cavity, through an intercostal space, in order to aspirate the liquid contained therein; a small tube will be connected to the needle through which it will be possible to collect the pleural fluid.

This allows to:

- obtain liquid samples that can be subject to specific tests
- improve the symptoms related to the feeling of breathlessness and conditioned by the compression of the liquid on the lung
- the re-expansion of the compressed and/or collapsed lung and the resumption of normal respiratory function

the procedure may include the introduction of a drainage catheter which may remain in place for a few days and which will allow the drainage of the liquid and/or the introduction of medicines.

Most common risks of this procedure

This maneuver can rarely lead to some sporadic complications:

- Hemothorax: collection of blood in the pleural cavity following an injury to an intercostal artery; it may require surgery to remove clots and perform haemostasis.
- Pneumothorax: presence of air in the pleural cavity, due to lung injury; it may require the placement of a chest drainage for a few days.
- Infection of the chest cavity: due to contamination of the cavity, it may require antibiotic treatment and possible drainage with pleural lavage and rare organ puncture injuries.
- Perforation of endothoracic organs: such as pericardium, heart, great vessels, diaphragm; specific treatments are requires from time to time, including corrective surgery

A specific treatment plan will be followed to prevent these risks, with monitoring of the main vital signs.

The Healthcare Personnel and the environments where the procedures take place are prepared for the immediate treatment of all possible complications.

CARDIOLOGICAL INTENSIVE THERAPY UNIT

Responsible: dr. M. Milo CONTACTS

Secretariat 040 399 4865; Pacemaker Clinic 040 399 4828 Hospitalisation 040 399 4877-040 399 4002

Drafted by ASUGI's Communication, External Relations, Press Office, URP on the basis of texts provided by dr. Milo of the Cardiolgy Department

CARDIOLOGY DEPARTMENT

Director: prof. Gianfranco Sinagra

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