

Thoracentesis Procedure Note

INDICATION: _____

PROCEDURE OPERATOR: _____

ATTENDING PHYSICIAN: _____ In Attendance (Y/N) _____

CONSENT:

Consent was obtained from _____ prior to the procedure. Indications, risks, and benefits were explained at length.

The procedure was performed emergently and the permission was implied because of the emergent nature.

PROCEDURE SUMMARY:

A time out was performed and the chest x-ray was reviewed, the appropriate side was confirmed and marked. My hands were washed immediately prior to the procedure. I wore a surgical cap, mask with protective eyewear, sterile gown and sterile gloves throughout the procedure. The patient was prepped and draped in a sterile manner using chlorhexidine scrub after the appropriate level was percussed and confirmed by ultrasound. 1% lidocaine was used to anesthetize the skin, subcutaneous tissue, superior aspect of the rib periosteum and parietal pleura. A finder needle was then introduced over the superior aspect of the rib to locate the pleural fluid; _____ colored fluid was aspirated at a depth of approximately _____ cm. A 10-blade scalpel was used to nick the skin at the insertion site. The Safe-t-Centesis needle was then introduced through the skin incision into the pleural space using negative aspiration pressure and the red colometric indicator to confirm appropriate positioning of the needle. The thoracentesis catheter was then threaded without difficulty. _____ ml of _____ colored fluid was removed without difficulty. The catheter was then removed. No immediate complications were noted during the procedure. A post-procedure chest x-ray is pending at the time of this note. The fluid will be sent for studies.

COMMENT:

ESTIMATED BLOOD LOSS: _____ ml

Physician Signature _____ ID# _____ Date _____ Time _____



VENTURA COUNTY MEDICAL CENTER
SANTA PAULA HOSPITAL
THORACENTESIS PROCEDURE NOTE

Patient Label
or
Two Patient Identifiers