

Subject: Scope of Practice/Procedure – Paramedic
Monitoring Thoracostomy Tubes

Associated Policies:

- I. Definition
Thoracostomy tubes are catheters surgically placed through the chest wall into the pleural space. The EMT-P may not perform placement of thoracostomy tubes.
- II. Equipment (provided by transferring facility)
 - A. Firm plastic thoracostomy tube.
 - B. Drainage receptacle attached to the thoracostomy tube to form a closed drainage system.
 - C. Rubber-tipped clamp.
- III. Indications for Placement
 - A. Removing free air from the pleural space.
 - B. Draining fluid (such as blood) from the pleural space.
 - C. Instilling medication into the pleural space.
- IV. Precautions
 - A. Keep drainage receptacle below level of chest to prevent drained fluid from re-entering pleural space.
 - B. Avoid pulling on thoracostomy tube to prevent accidental dislodging of the tube.
 - C. Keep drainage tubing in view and do not permit dependent loops or kinks to form, as this will interfere with the flow of drainage leading to increased pleural pressure or formation of clots.
 - D. Do not disconnect drainage system or puncture tubing. Tape all connections securely to prevent violation of sterility and loss of negative drainage pressure.
 - E. Keep dressing at insertion site secure to prevent air entering the pleural space and maintain aseptic technique.
- V. Complications
 - A. Complications require immediate intervention. Contact the base hospital to report the problem, the intervention taken, and to request further treatment.
 - B. If accidental withdrawal of tube occurs, place occlusive dressing over insertion site.
 - C. If the tube becomes dislodged or a malfunction with air leakage occurs in the system, clamp the tube close to the chest wall and observe for signs and symptoms of tension pneumothorax. If tension pneumothorax occurs unclamp the tube.

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- D. If the tube becomes blocked due to kinks or compression of the drainage tube, free the tubing. If it is blocked due to clots, observe for signs and symptoms of tension pneumothorax.
- E. If drained fluid re-enters the pleural space, place receptacle below level of chest to facilitate gravity drainage.
- F. If hemorrhage occurs through chest tube, observe for signs and symptoms of shock and treat according to protocol.

Approved: 

Approved as to Form: 