



Patient & Family Guide
2021

Thoracentesis



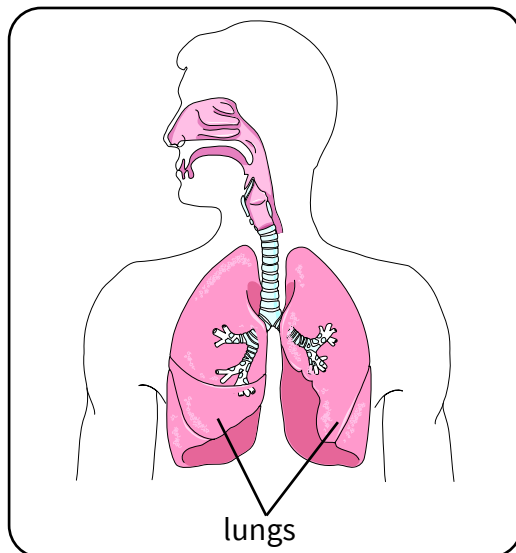
www.nshealth.ca

Thoracentesis

Pleura is tissue that covers the lungs and lines the inside of the chest wall. The area between these layers of tissue is called the pleural space. Normally, there is fluid in this space.

Some conditions (such as an infection, heart failure, or cancer) can cause extra fluid to collect in the pleural space. The buildup of extra fluid between the layers of the pleura is called a pleural effusion. A large amount of fluid may cause pressure on the lung and make it hard to breathe.

A thoracentesis is a procedure where a needle is carefully inserted (put in) to take out fluid or air from the pleural space. This procedure is also called a pleural tap.



Why is a thoracentesis done?

- › To find out why the extra fluid or air collected in the pleural space
- › To help the symptoms (such as shortness of breath) caused by the extra fluid or air in the pleural space that is compressing (pressing on) the lung

How do I get ready for a thoracentesis?

- There is no special preparation for this test.
- **Make sure your health care team knows you are taking blood thinners or have a bleeding disorder.**

Where is the procedure done?

The procedure is done in the Respirology Clinic or on an inpatient nursing unit. The Clinic is on level 4 in the Halifax Infirmary, near the Robie Street entrance.

How is a thoracentesis done?

- You will be in a sitting position.
- The doctor will look closely at your chest. They will use an ultrasound machine to find the best area to insert the needle.
- A large area on your back will be washed with a cleaning solution.
- A medication to numb a small area of your back will be injected into your skin. There will be a stinging feeling when the “freezing” medication is injected.
- The thoracentesis needle will then be placed through the skin of your chest wall, between your ribs, into the space around your lungs (called the pleural space). You may feel a bit of pressure when the needle is inserted into the pleural space.
- **Try not to cough, breathe deeply, or move during the procedure, as this may injure your lung. The needle will be in place for a few minutes.**
- Fluid will be taken out using a syringe or a vacuum bottle. The needle will be taken out and a bandage will be used to cover where the needle was placed.
- The fluid will be sent to the lab for tests.

What happens after a thoracentesis?

- A chest X-ray may be done after the procedure.
- If the thoracentesis is done in the Clinic, you may go home after the procedure.

Call your primary health care provider or go to the nearest Emergency Department if you:

- › Cough up blood
- › Have trouble breathing
- › Have chest pain

**What are your questions?
Please ask. We are here to help you.**

Looking for more health information?

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.

Please do not use perfumed products. Thank you!

www.nshealth.ca

Prepared by: Nancy Morrison MD, FRCPC ©, Respiriology Clinic

Illustration by: LifeART Super Anatomy 1 Images, Copyright © 1994, TechPool Studios Corp. USA

Designed by: NSHA Library Services

The information in this brochure is for informational and educational purposes only.

The information is not intended to be and does not constitute health care or medical advice.

If you have any questions, please ask your health care provider.

WF85-0542 © April 2021 Nova Scotia Health Authority

The information in this pamphlet is to be updated every 3 years or as needed.