FORM
CAMPUS
DR. RON SOMOGYI, MD, FRCSC · DR. CORY GOLDBERG, MD, FRCSC · DR. MICHAEL BRANDT, MD, FRCSC

DRAIN CARE INSTRUCTIONS

Jackson-Pratt (JP) Drain

Please see our drain care video at: https://youtu.be/EGzqXLO9UI8

The Jackson-Pratt (JP) drain is a special tube that prevents body fluid from collecting near the site of your surgery. The drain pulls this fluid (by suction) into a bulb. The bulb can then be emptied and the fluid inside measured and recorded. At first, this fluid is bloody. Then, as your wound heals, the fluid changes to light pink, light yellow or clear. The drain will stay in place until less than 30 cc (about 2 tablespoons) of fluid is collected in a 24-hour period for 3 days in a row.

Caring for the JP drain is easy. Depending on how much fluid drains from your surgical site, you will need to empty the bulb every 8 to 12 hours. The bulb should be emptied when it is half full. Before you are discharged, your nurse will show you how to:

- empty the collection bulb;
- record the amount of fluid collected;
- squeeze the bulb flat and plug it so that the suction works again;
- keep the drain site clean and free of infection.

HOW TO EMPTY THE DRAIN

1. Wash your hands well with soap and water.
2. Pull the plug out of the bulb. (Not the tube. Leave that alone.)
3. Measure the fluid.
4. Clean the plug with alcohol. Then squeeze the bulb flat. While the bulb is flat, put the plug back into the bulb. The bulb should stay flat after it is plugged so that the vacuum suction can restart.
5. Measure how much fluid you collected. Write the amount of drainage, and the date and time you collected it, on the JP drain chart, and record the total drainage for 24 hours.
6. Flush the fluid down the toilet.
7. Wash your hands.

DRAIN DRESSING

Sometimes a large amount of fluid may leak from around the drain site, soaking the gauze dressing. If this happens, clean the area with soap and water. Check that the bulb drain is secured and squeezed flat to provide the needed suction.

90 Eglinton Avenue East, Suite 700, Toronto, Ontario M4P 2Y3
T (416) 447-6176 · F (416) 447-5750 · FORMFACEBODY.CA

These instructions are general guidance. Your surgeon or provider may give you instructions specific to your care, and those take priority.

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MILKING THE DRAIN

Solids can also form within the drain. These appear as dark red, stringy collections or yellow floating debris, and can stop the fluid from flowing through the tube. You can "milk" the tube to dislodge the clot from inside it; please see the video on how to milk the tube. This should be done at least once a day, or more often as needed to keep the fluid flowing.

HOW TO CHECK FOR INFECTION

Watch the skin around the drain for these signs of infection: increased redness, increased pain or increased swelling.

> Other signs of infection are a fever greater than 38.5°C (101°F) or cloudy yellow, tan or foul-smelling drainage. Report any of these symptoms to us as soon as possible.

JP DRAIN CHART

DATE	TIME	DRAIN 1	DRAIN 2	DRAIN 3	DRAIN 4
Drain location					
24 hr total					

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