

NURSING 202 – ADVANCED CONCEPTS OF NURSING

CLASS PREP - CHEST TRAUMA: CHEST TUBES & DRAINAGE SYSTEMS

It is important for the nurse to provide competent care when the patient has a chest tube. Independently review chest tube care and answer the following questions.

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1. What should be your focal assessments for a patient with a chest tube?

Focal assessment on VS and resp status (listening to lung sounds, spO₂), assessing insertion site, maintaining the drainage system below lvl of insertion and observing for kinks and color, assess pain and monitor for tidaling and bubbling.

2. Define the term “tidaling”.

Tidaling refers to water-seal chamber that lvls fluid during respirations, fluid rises during inspiration which is negative pressure and falls during expiration.

3. Why might tidaling fail to occur?

It might fail if there's some kinks that could block airflow, lung re-expansion, or if there's disconnection or improper suction settings.

4. Define/describe the term “bubbling”.

Bubbling happens when air enters the water-seal chamber.

5. What causes bubbling?

Air leak or excessive suctioning from pulling air into the system could cause bubbling.

6. What is an acceptable safety measure regarding tubing connections for chest tubes and drainage tubing?

To ensure that all tubing connections are taped securely, and to keep drainage system upright and below insertion site which will prevent backflow.

7. What is the generally ordered suction pressure for a chest tube drainage system?

Generally ordered suction pressure is -20 cmH₂O.

8. What pressure should you set the wall suction regulator to?

Wall suction regulator to no less than -80 mmHg

9. What type of dressing would be used for a chest tube dressing?

An occlusive dressing is used to seal the insertion site.

10. Name 2 priority nursing diagnoses when providing care to the patient who has a chest tube.

Risk for Infection: due to invasive chest tube

Impaired Gas Exchange: due to lung collapsing or fluid accumulating.