

# Going Home with a Wound Drain



Having a drain after surgery is very common. It gently removes excess fluid and blood from the surgical site, helping you heal and reducing the risk of infection. Many patients go home with their drain in place. A community nurse, our clinic, or your GP will check on you regularly, and the drain is usually removed within 1 to 2 weeks once the daily fluid output slows down.

## How Does Your Drain Work

During your surgery, a soft, thin plastic tube was placed near your wound. Fluid passes through tiny holes in this tube and collects in a bulb or bellows at the end. You have one of two main systems, shown below. Both are "closed systems," meaning fluid can only flow in one direction, away from your wound. This keeps everything safe and sterile. The fluid colour may range from red (like blood) to clear (like urine).

### Bulb-type drain

These drains have a compressible bulb that continuously draws fluid out of the wound.



### Bellows-type drain

These drains have a compressible bellow that continuously draws fluid out of the wound.



## Daily Care and Living

### Showering

You can shower. Your wound has a waterproof dressing. Avoid soaking it in a bath or swimming.

### Washing Your Hands

Always wash your hands thoroughly before and after handling your drain to prevent infection.

### Clothing

Wear loose clothing. Don't tuck the bulb into tight pockets, skirts, or belts: it needs room to expand.

### Positioning

Keep the bulb level with or below your wound so gravity helps it drain. Make sure the tubing isn't twisted or kinked.

## Measuring the Fluid

You will need to measure how much fluid drains each day:

1. Empty the bulb or bellows by compressing the chamber so the contents blow into the collecting bag
2. Check the measurement on the bag and record this on a piece of paper

If the bag is full you will need to obtain a new bag from your community nurse or pharmacy. When changing the bag, clamp the tubing, unscrew the old bag and place in general waste. Ensure the new bag is screwed on tightly, the bellows or bag is compressed and the clamps are released.

# Going Home with a Wound Drain

Warning signs, troubleshooting and removal



## ! Warning Signs: When to Seek Help

- Pain that is getting worse and not relieved by medication
- Redness, swelling, heat, or smelly discharge around your wounds
- The fluid drainage rapidly increases in quantity or changes colour to a bright red or thick yellow/green.
- Fevers, chills, or flu-like symptoms
- Inability to pass urine, gas, or have a bowel movement
- New calf pain or swelling, chest pain, or shortness of breath

Call us on 02 9997 7346. After hours, attend your nearest emergency department or call 000.

## Troubleshooting

### ● Fluid stops draining

The drain may be blocked, especially if fluid leaks onto the skin around the tube. Check that the clamps are open and the tubing isn't kinked. If you are unsure, contact us.

### ● Drain slips out

Watch for drainage holes appearing outside your skin, or the bulb filling with air when squeezed. If it falls out completely, do not reinsert it: cover with a dry dressing, bag the tube, and contact us.

## Having the Drain Removed

### ✓ Ready for removal when:

Your drain collects less than 20mls of fluid per day for two days in a row. Keep recording your daily output so your nurse knows when this point is reached.

Your community nurse, GP or our clinic nurse can remove the drain. They will take out the securing stitch and gently pull the tube out. This may be briefly uncomfortable, but it is over quickly.