

THORACENTESIS AND PARACENTESIS

INFORMATION FOR PATIENTS

Centesis

WHAT IS IT?

Centesis is a directed puncture into a body cavity performed to remove fluid. There are many types of centesis performed. Some of the most common ones include paracentesis, thoracentesis, arthrocentesis, pericardiocentesis, and many more. The fluid can be removed for diagnostic purposes, therapeutic purposes or both.

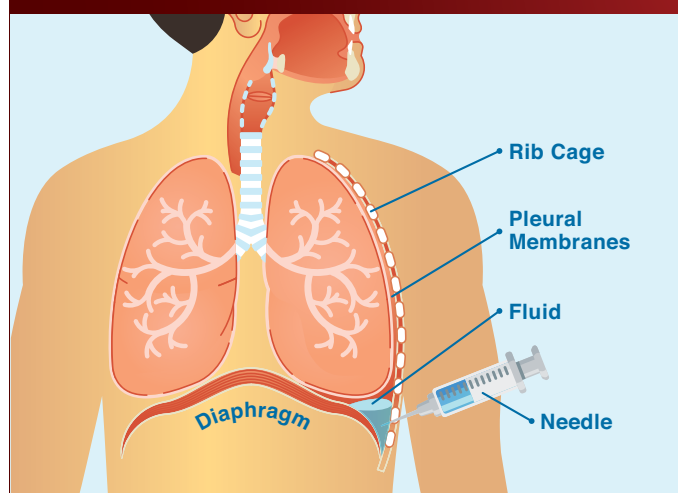
PREPARATION

- Please notify your health care team before the procedure if you are taking blood thinning / anticoagulation medications, or anti-platelet medications such as aspirin or Plavix. Also ask your provider before taking any over the counter medications such as laxatives, herbs, food supplements, or teas.
- Arrive at the hospital one hour prior to your appointment time

POST PROCEDURE CARE

- No strenuous activity for the rest of the day

Thoracentesis



Thoracentesis is a procedure in which fluid is obtained from the space around the lungs, called the pleural space. The pleural space normally contains a small amount of fluid to lubricate the lungs as they expand within the chest. However, some conditions can result in an increased volume of pleural fluid, called a pleural effusion. Potential causes may include lung abnormalities; problems with the heart, kidneys, or liver; cancer; and others.

WHAT TO EXPECT?

Before the procedure, a chest X-ray or ultrasound will be done to identify the exact location of the pleural effusion. In some cases, a blood test will be taken before the procedure as well.

For the procedure you will be positioned on the edge of the bed with your arms resting on a table or you will be lying down turned to the opposite side of the pleural effusion. The area of the body where the needle will be inserted is sterilized and draped. A local anesthetic will be injected to numb the area. A centesis catheter will be inserted into the pleural effusion with ultrasound guidance. A suction device will attach to the catheter and fluid will begin to drain. The procedure takes about 15-20 minutes. You may experience some coughing as the fluid is removed due to the lungs expanding. Once enough fluid is drained, the catheter will be removed and the puncture site will be covered with a bandage.

After the procedure, a chest X-ray will be repeated to make sure the lung re-expands completely into the area previously occupied by the pleural effusion.

RISKS

- Incomplete lung re-expansion (pneumothorax)
- Bleeding
- Pulmonary edema
- Infection

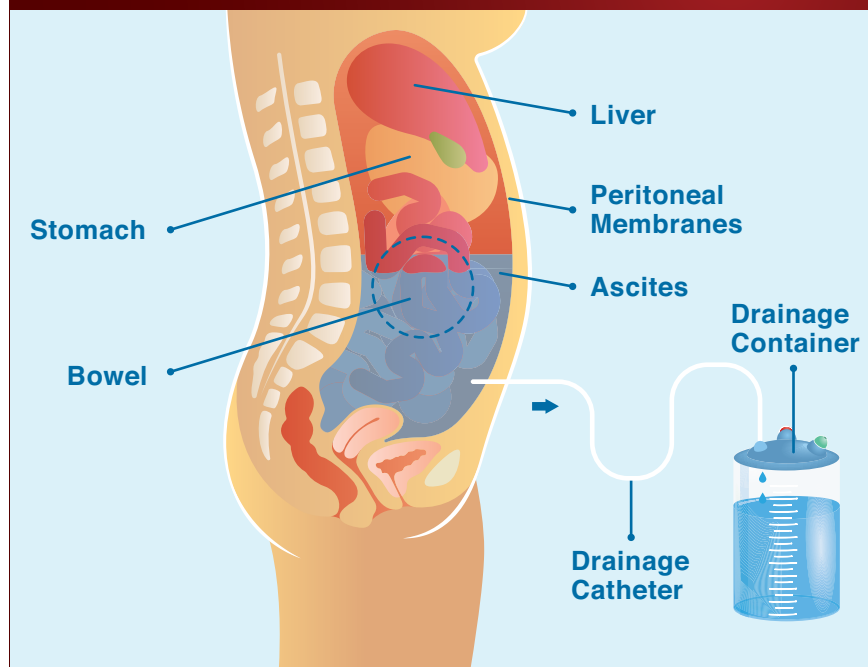


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Paracentesis



Paracentesis is a procedure to remove fluid accumulating in the abdominal cavity between the abdominal organs and abdominal wall lining. This fluid, called ascites, is not present normally but can accumulate in settings such as underlying liver dysfunction or cirrhosis, heart failure, kidney disease, or cancer.

WHAT TO EXPECT?

Before the procedure, an ultrasound will be done to assess the amount of ascites. An IV may be started if albumin or other fluids will be required during or after the procedure (albumin is a medication used to offset removal of a large volume of ascites). You will be positioned on your back and the area where the needle will be inserted is sterilized and draped. A local anesthetic will be injected to numb the area. A centesis catheter will be inserted into the ascites with ultrasound guidance. A suction device will attach to the catheter and fluid will begin to drain. Once enough fluid has been drained, the catheter will be removed and the puncture site will be covered with a bandage.

After the procedure, you will be monitored to ensure you do not have any adverse symptoms, in addition to checking your vitals to ensure they are normal.

RISKS

- Bleeding
- Infection
- Injury to surrounding structures

For more information or to schedule a procedure:
Phone: (713) 358-0600 • Fax: (832) 565-9985
Email: synergyvascular@synergyrad.org

Online Referral Form:
synergyvascular.org/referral



SEEK CARE IMMEDIATELY IF:

- ✓ You are urinating very little or not at all
- ✓ You have a fever
- ✓ You have new and sudden chest pain
- ✓ You have sudden or severe pain in your abdomen
- ✓ You suddenly feel lightheaded or have trouble breathing
- ✓ Your puncture site is red, warm, swollen or draining pus



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