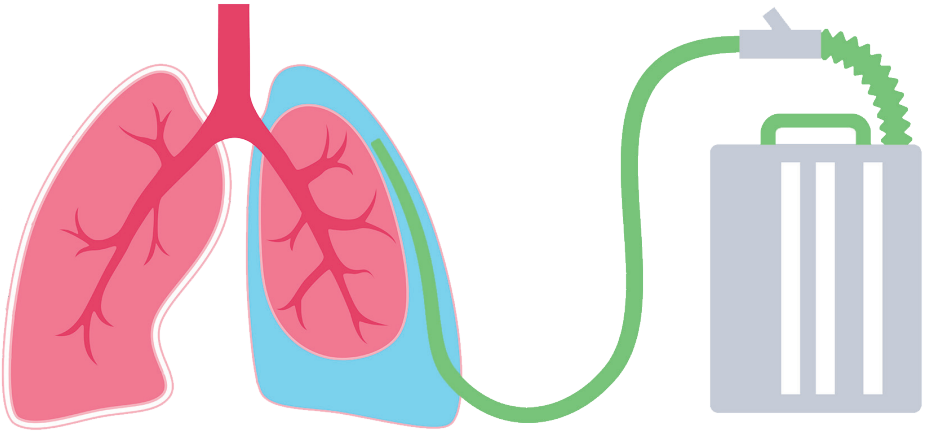




**CHU  
Sainte-Justine**  
Le centre hospitalier  
universitaire mère-enfant  
Université **de Montréal**

# Chest Drain

Information for Patients and Families





## What is a chest drain?

A chest drain is:

- ▶ a flexible tube inserted between two ribs of the chest wall, reaching into the space around the lungs;
- ▶ used to drain (remove) air or fluid that has accumulated around the lungs.

In this leaflet, the term “chest drain” refers specifically to a “pleural chest drain.” This guide does not apply to other types of chest drains.

## Why does my child need a chest drain?

After thoracic surgery, chest injury, infection, or certain illnesses, air or fluid can build up in the space around the lungs. This air or fluid prevents the lungs from fully and properly expanding. A chest drain allows the air or fluid to be removed and helps the lung re-inflate properly. Your child can then breathe more easily.

## How is the chest drain inserted?

- ▶ The chest drain is inserted by a doctor in an operating room, radiology room, or treatment room.
- ▶ The doctor performing the procedure will explain the process, as well as the risks and benefits, to you and your child. Do not hesitate to ask questions—the medical team is here to guide you. Sometimes a chest drain must be inserted urgently when breathing is compromised; in this case, explanations may be briefer.
- ▶ Before insertion, a medication that blocks pain sensations will be used to locally numb the insertion site, and the skin will be disinfected. Your child will also receive medications (pain relief and/or sedation) to reduce distress and pain during the tube insertion.
- ▶ The chest drain is placed just under the skin between two ribs, in the numbed area. Then, the drain is gently inserted into the correct space.
- ▶ The chest drain will be secured to the skin with stitches to keep it in place, and a dressing will be applied over it.
- ▶ The chest drain will then be connected to a device to collect the air or fluid.
- ▶ Depending on your child’s situation, the device may be connected to a wall suction system to help drain air or fluid. Your child’s nurse will regularly check the chest drain and the device.
- ▶ Your child will need to stay in the hospital while the chest drain is in place.

## What will the follow up be for my child?

- ▶ The medical team will order chest X-rays as needed to monitor your child's lungs. Your child might need daily X-rays to assess progress.
- ▶ They will decide when the chest drain can be removed.

## What can I do to help my child with a chest drain?

- ▶ Talk with the medical team and your child's nurse about the chest drain. Explain to your child that the drain will help them breathe easier and get better.
- ▶ Your child may feel pain or discomfort at the drain insertion site. Don't hesitate to inform the nurse if you think your child is in pain or discomfort. Sometimes it's hard to identify signs of pain in children—ask the nurse for advice.
- ▶ Pain relief medications can be given as needed to reduce discomfort.
- ▶ Unless medically contraindicated, your child should move and get up, even with a chest drain. Being active will help your child heal faster. Validate with the nurse about which movements are allowed for your child. Also, ask about pain relief options that can be used before your child begins to move.
- ▶ Some children feel anxious when they have a chest drain, which is normal. During your child's hospital stay, child life specialists and special educators can provide support, help lower anxiety and pain, and use therapeutic play to help your child adapt and cope. You may speak with your nurse about accessing these services.

### Follow these safety tips:

- ▶ Do not move the collection device yourself;
- ▶ Do not bend the tubing;
- ▶ Do not try to move the fluid inside the tubing;
- ▶ Do not touch the chest drain tubing yourself;
- ▶ Do not move and remove anything from the small emergency supply bag hanging near your child.
- ▶ Keep the dressing dry.

## When should I call the nurse?

Call the nurse immediately if:

- ▶ Your child has more difficulty breathing:
  - › rapid, shallow breathing;
  - › retractions (skin pulling in between ribs when breathing);
  - › grunting when breathing;
  - › blue or purplish color of lips or nails;
  - › wheezing.
- ▶ The chest drain is disconnected from the collection device.
- ▶ The chest drain tubing is bent or twisted.
- ▶ The chest drain slips out of the dressing or fluid is leaking from the dressing.
- ▶ There seems to be more fluid on the dressing.

## How is the chest drain removed?

- ▶ When your child's lungs have returned to their normal position and the chest drain is no longer needed, it will be removed.
- ▶ The removal will take place in your child's room on the care unit.
- ▶ Pain and distress relief methods will be offered to help your child cope (e.g., tablet games, videos on a phone, child life specialist or special care counselling support).
- ▶ You can be present to comfort your child during the procedure.
- ▶ The medical team will remove the stitches to free the chest drain.
- ▶ After removal, a new dressing will be applied. It is important to keep it clean and dry for 5 days.

Feel free to visit the *Tout doux* website to learn more about ways to help your child with medical procedures: [www.chusj.org/toutdoux](http://www.chusj.org/toutdoux)



**This leaflet contains general information only. Always talk with a member of your child's medical or healthcare team about specific care.**





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