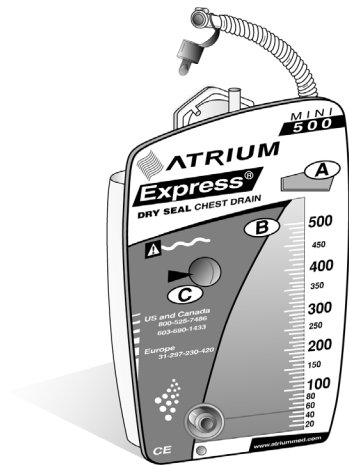


Care After Your Chest Tube is Connected to the Atrium 500®

What is the Atrium® 500?

The Atrium 500® is a small portable chest drainage system that allows you to go home with a chest tube in place. It allows fluid and air to escape from your chest until your lung heals. Simple advice for the care of this device is in this handout.



Chest Tube and Valve Care

- You cannot shower when attached to the mini 500.
- Check your chest tube site each day for signs of infection (do this with the dressing change).
- Keep the Atrium 500® upright **at all times** and below the level of your chest.
 - Use the hanger provided or use the straps with walking.
 - If it tips over or is placed on its side fluid may leak out of the top.
 - If it is above the level of the chest, fluid will not be able to drain out of the chest.
- Do not allow it to fully fill with fluid. This will prevent your lungs from expanding.

What if the chest tube disconnects from the Atrium 500®?

If the tube comes off from the Atrium 500®, you will need to attach it right away. Be sure to tape it firmly. If you can't get it back together, go to the emergency room.

Tips

- Make sure the blue clamp on the tubing is open so that fluid and air can drain out.
- If draining fluid, check the amount of fluid in the container, you do not want it to get full.

Dressing Change

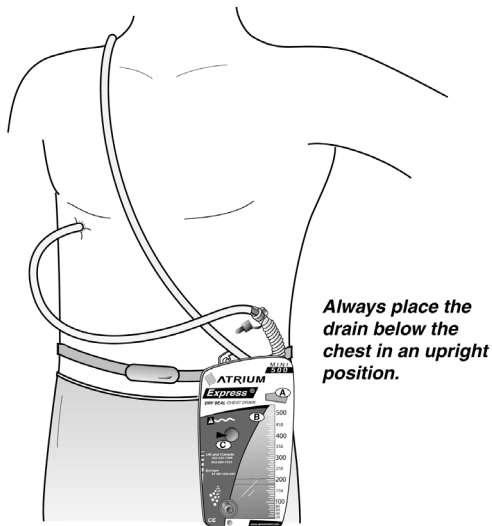
Supplies needed: Two split gauze, two pieces of standard 4x4 gauze and tape.

The chest tube site needs to be washed with mild soap and water every day. Do not use soaps with lotion or a heavy scent. This can bother your skin. If you have a lot of drainage around the site, you may need to do a dressing change more than once a day.

1. Lay the split gauze down first against your skin, placing the slit on each piece of gauze in opposite directions so that no skin is seen around the tube.
2. Next, lay the two pieces of standard 4x4 gauze on top of the split gauze.
3. Tape down the edges of the gauze entirely to create a barrier. Tape over the tube so that it stays in place.

Secure the Atrium 500® with one of the straps provided. Be sure to place the secured tube and the Atrium 500® below the site on your chest. This will allow fluid and air to escape so that your lungs can stay expanded.

The connection between the chest tube and valve will be secured with a band. Tape or a Band-Aid may be placed around this band to protect your skin from its hard edges.



When the Atrium 500® Gets Full

When your chest tube fills to the 400 ml mark you will be instructed to either empty the mini 500 **or** change to a new atrium 500®. This is decided by your doctor.

Emptying the Atrium Express®

Supplies needed: Syringe and alcohol wipes.

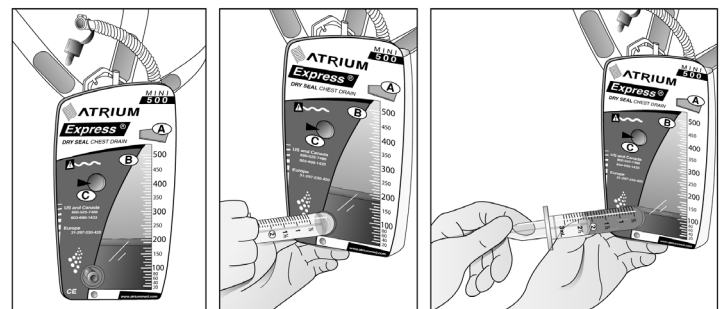
1. Wash your hands.
2. Alcohol wipe the port at the front of the atrium 500 for 15 seconds.
3. Screw the newly opened syringe to the port.
4. Pull the plunger back on the syringe to draw the fluid out.
5. When the syringe is full, empty it into the toilet.
6. Repeat as needed.

7. Throw the syringe away and wipe the port off with an alcohol wipe.
8. Wash your hands.
9. **Write down what day you emptied the chest tube, how much you removed, and the color of the fluid. Your doctor will want to know this.**
10. If the fluid becomes hard to draw out, then call your doctor's office.

At times the fluid that you are draining out of your chest may be too thick to remove by this method. If this is the case, you may need to change over to a new Mini 500.

Changing to a New Atrium 500®

1. Wash your hands.
2. Clamp your chest tube.
3. Attach the new atrium 500® to your chest tube.
4. Unclamp your chest tube.
5. Wash your hands.
6. Keep track of when you changed your chest tube, how much fluid was in it, and the color of the fluid.



Date Emptied	Amount Emptied	Color of Fluid

Activity

- If you have only a chest tube, you have no lifting restrictions, you can do what feels okay.
- If you have an incision, do not lift more than 5-10 pounds for 3-4 weeks after your surgery.
- Do not soak in a bathtub, hot tub, or swim while the chest tube is in place or until healed.
- Do not drive if you are taking certain pain medicines, check with your doctor.

When to Call

- You have a sudden sharp chest pain with shortness of breath, **call 911**.
- Site is more tender or pain that does not go away with pain medicine.
- Fever over 100.4° F for two readings taken by mouth, 4 hours apart.
- Signs of infection:
 - Increased redness or warmth at insertion site.
 - Pus-like drainage
 - Large amounts of swelling or bleeding

Meet with your doctor each week or every other week. A chest x-ray will be done before your visit to see how your lung is doing.

Who to Call

Surgery Clinic
Monday – Friday
8:00 am – 4:30 pm
(608) 263-7502 or 1-800-323-8942

After hours, weekends and holidays call **(608) 263-6400**. This number will reach the paging operator. Ask for the **thoracic surgery resident on call**. Leave your name and phone number with the area code. The doctor will call you back.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 1/2024 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#6603