Having a thoracocentesis (pleural aspiration or pleural tap)

This leaflet explains about thoracocentesis – a procedure to remove and test fluid from the space between the lungs and the chest.

If you have any further questions or concerns, please do not hesitate to contact the Pleural Team (contact details on page 3).

What is a thoracocentesis?
Thoracocentesis is a procedure to remove fluid from the space between the lungs and the chest wall, and to allow this fluid to be tested to see what the cause of the problem might be.

Why do I need a thoracocentesis?
The space between the lung and the chest wall is known as the pleural cavity or pleural space. The pleural space consists of two thin membranes, one lining the lung and the other lining the chest wall. These layers lie very close together and usually have a very small amount of fluid in the cavity (15–30ml). In your case a larger amount of fluid has collected in this space (this is called pleural effusion), so the lung cannot work properly, making you short of breath.

Thoracocentesis is procedure that is carried out to try and find the cause of a pleural effusion. If we know the cause, it makes it easier to consider treatments for the problem. A thoracocentesis could also help to improve your breathing.

How can I prepare for thoracocentesis?
Please inform us about any previous bleeding problems, any allergies to medicines or latex. Please also inform us if you are on warfarin.

What does this involve?
We will carry out the procedure in the clinic and it will take 10–15 minutes.

First we will position you in a comfortable sitting position, leaning forward and resting your arms on a table. We will carry out an ultrasound scan (a procedure that uses high-frequency sound waves to create an image of part of the inside of the body) to locate an appropriate area for the thoracocentesis. We will take precautions to minimise infection. Once we have found an appropriate area, we will inject a local anaesthetic to make the area numb. This may sting slightly for a short period of time.
We will then make a small cut in the chosen area. We will pass a special needle through this cut and into the pleural space. Once the fluid is removed, we will remove the needle and place a small dressing where it was inserted.

**How does this help?**

The fluid that has been removed will be sent to the laboratory to be tested. The results of these tests can help us to try and establish the cause of the pleural effusion (excess fluid). This then allows us to discuss the appropriate treatment with you.

**What happens after the test?**

You may need a chest X-ray after the test to check for any lung problems. If large amount of fluid is removed, you may need to stay for a little while so we can check your oxygen and breathing. Once you are stable you can go home the same day.

Once at home, call your own doctor/GP immediately if you have any breathing problems.

**What are the risks involved?**

A thoracocentesis is a safe procedure, but as with any procedure there are some risks. The risks are usually minor and are easily treated. The risks include:

- **Pneumothorax** – air collecting in the pleural space. Usually this heal by itself. However, a large amount of air may cause the lung to collapse. In this case, we will need to insert a a chest drain (a special tube) to resolve the problem.
- **Pain, bleeding, bruising or infection** where the needle was inserted occurs in less than 6 in every 100 cases.
- In rare cases bleeding may occur in or around the lungs.

**Asking for your consent**

We want to involve you in all the decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This confirms that you agree to have the procedure and understand what it involves.

If you would like more information about our consent process, please speak to a member of staff caring for you.
Contact us
If you have any questions or concerns about thoracocentesis, please contact the Department of Respiratory Medicine at St Thomas’ Hospital Monday to Friday 09.00 – 17.00. Out of hours or in emergency please contact your General Practitioner or local accident and emergency department.

**t:** 020 7188 5821

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

**t:** 020 7188 8801 (PALS)  **e:** pals@gstt.nhs.uk
**t:** 020 7188 3514 (complaints)  **e:** complaints2@gstt.nhs.uk

Language Support Services
If you need an interpreter or information about your care in a different language or format, please get in touch:

**t:** 020 7188 8815  **e:** languagesupport@gstt.nhs.uk

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

**t:** 111

NHS Choices
Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** www.nhs.uk

Get involved and have your say: become a member of the Trust
Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

**t:** 0800 731 0319  **e:** members@gstt.nhs.uk  **w:** www.guysandstthomas.nhs.uk/membership