



PATIENT & CAREGIVER EDUCATION

Caring for Your Penrose Drain

This information explains how to care for your Penrose drain after you leave the hospital. Your nurse will review these instructions with you before you leave. They'll also give you the supplies you need.

About Your Penrose Drain

A Penrose drain is a soft, flat, flexible tube made of latex. It lets blood and other fluids move out of the area of your surgery. This keeps fluid from collecting under your incision (surgical cut) and causing infection.

Part of your Penrose drain will be inside your body. One or both ends of your drain will come out of your incision. Some blood and fluid will flow out of your drain onto a dressing (gauze bandage) around it. A safety pin or a small tab is usually left at the end of the drain to keep it from slipping into your wound (see Figure 1).



Figure 1. Penrose drain

How long you have your drain depends on your surgery and how much fluid is draining from your incision. As your incision heals, you'll have less fluid.

When no fluid drains from your Penrose drain for 24 hours, contact your doctor to make an appointment to remove it.

Instructions for Changing Your Dressing

Change your dressing 2 times every day and anytime it's wet or loose. It's best to change it around the same time every day.

Every time you change your dressing, write down the following information:

- How much drainage is on the gauze? For example, is it about the size of a dime, a quarter, a lime, or an orange?
- What color is the drainage? For example, is it bright red, dark red, pink, brown, or yellow?
- Does the drainage have any odor (smell)? For example, does it smell foul, sweet, or musty?

You can use the drainage log at the end of this resource. Bring your drainage log to each of your appointments.

Gather your supplies

Before you take your dressing off, gather the following supplies:

- Clean, soft washcloth
- Soap
- 2 sterile 4-inch by 4-inch (4x4) gauze
- Paper tape
- 1 pair of nonsterile gloves

If your gauze doesn't already have a cut in it, you'll also need a clean pair of scissors.

Change your dressing

It's a good idea to change your dressing near a sink. You'll need to clean the area around your incision with soap and water.

1. Clean your hands.
 - If you're washing your hands with soap and water, wet your hands and apply soap. Rub your hands together well for at least 20 seconds, then rinse. Dry your hands with a disposable towel. Use that same towel to turn off the faucet.
 - If you're using an alcohol-based hand sanitizer, be sure to use enough to cover both of your hands. Rub your hands together until they're dry.
2. Carefully remove your dressing. Look at the color and amount of drainage and notice any odor before you throw it away. Write down what you see and smell in the drainage log at the end of this resource.
3. Look at and feel your skin around where the drain is inserted. If you have any tenderness, swelling, or pus, call your doctor's office. These could be signs of an infection.
4. Clean your hands again. Follow the instructions in step 1. Then, put on the nonsterile gloves.
5. Use the washcloth, soap, and water to clean the skin around and under your Penrose drain. Be careful not to pull it out. Wipe away any remaining soap and dry your skin well.
6. If the 4x4 gauze doesn't already have a cut in it, use the clean scissors to make a cut in one of the gauzes. The cut should start in the center of one side and go to the middle of the gauze pad (see Figure 2).

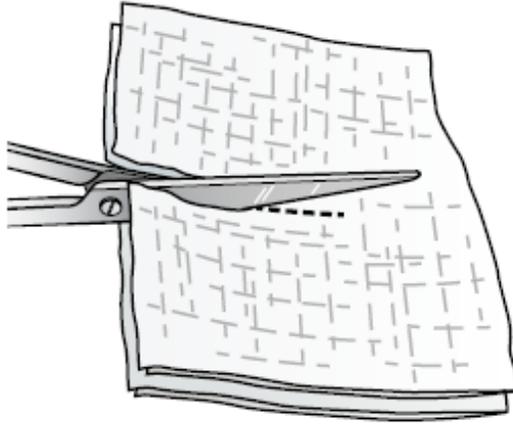


Figure 2. Cutting the gauze

7. Put the cut 4x4 gauze under your Penrose drain (see Figure 1). Your Penrose drain with the safety pin in place should lie flat on top of the gauze.
8. Cover your Penrose drain with the other 4x4 gauze.
9. Secure the gauze with paper tape.
10. Take off your gloves. Throw them away.
11. Clean and dry your hands. Follow the instructions in step 1.

Follow your nurse's instructions for going back to doing your usual activities and following your usual diet.

When to Call Your Healthcare Provider

Call your doctor or nurse if:

- You have a fever of 100.4 °F (38 °C) or higher.
- You have increased discomfort, tenderness, redness, or swelling near your Penrose drain or incision.
- The skin around your Penrose drain is hot to the touch.
- The drainage from your Penrose drain is thick, green, or has a bad smell.
- Your Penrose drain comes out.

If you have any questions, contact a member of your care team directly. If you're a patient at MSK and you need to reach a provider after 5 p.m., during the weekend, or on a holiday, call 212-639-2000.

