



PATIENT & CAREGIVER EDUCATION

# Caring for Your Jackson-Pratt Drain

This information explains how to care for your Jackson-Pratt® drain when you leave the hospital. You may also find it helpful to watch the video below.

## About Your Jackson-Pratt Drain

Your Jackson-Pratt drain has a soft plastic bulb with a stopper and a flexible tube attached to it (see Figure 1). The drainage end of the tubing (flat white part) is placed into your surgical site through a small opening near your incision. This area is called the insertion site. A suture (stitch) will hold it in place. The rest of the tube will extend outside your body and will be attached to the bulb.

When the bulb is compressed (squeezed) with the stopper in place, a constant gentle suction is created. The bulb should be compressed at all times, except when you're emptying the drainage.

How long you will have your Jackson-Pratt drain depends on your surgery and the amount of drainage you're having. Everyone's drainage is different. Some people drain a lot, some only a little. The Jackson-Pratt drain is usually removed when the drainage is 30 mL or less over 24 hours. You will write down the amount of drainage you have in the drainage log at the end of this resource. It's important to bring your log with you to your follow-up appointments.

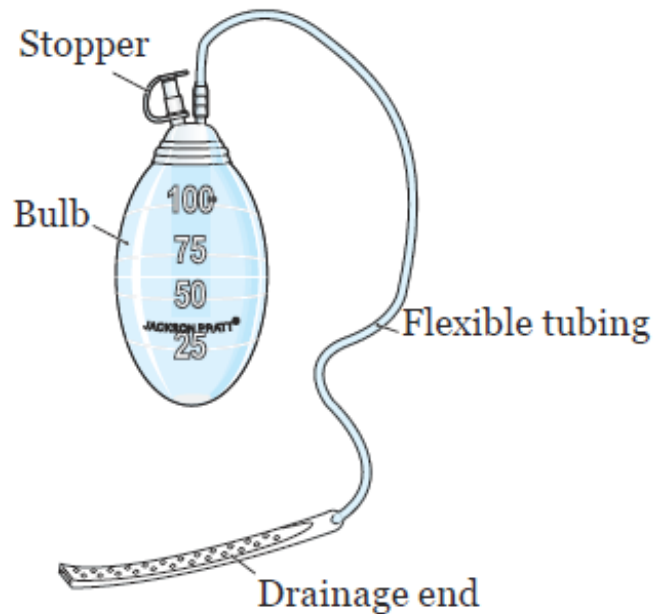


Figure 1. Jackson-Pratt drain

# Caring for Your Jackson-Pratt Drain

When you leave the hospital, you will care for your Jackson-Pratt drain by:

- Milking your tubing to help move clots.
- Emptying your drain 2 times a day and writing down the amount of drainage on your Jackson-Pratt drainage log at the end of this resource.
  - If you have more than 1 drain, make sure to measure and write down the drainage of each one separately. Don't add them together.
- Caring for your insertion site.
- Checking for problems.

## Milking your tubing

These steps will help you move clots through your tubing and keep the drainage flowing.

Milk your tubing before you open the stopper to empty and measure your drainage. You should also do this if you see fluid leaking around the insertion site.

1. Clean your hands.
  - To wash your hands with soap and water, wet your hands, apply soap, rub them together for at least 20 seconds, then rinse. Dry your hands with a towel and use that same towel to turn off the faucet.
  - If you're using an alcohol-based hand sanitizer, cover your hands with it, rubbing them together until they're dry.
2. Look in the mirror at the tubing. This will help you see where your hands need to be.
3. Pinch the tubing close to where it goes into your skin between the thumb and forefinger of your hand. Keep this hand in place while you milk your tubing. This will help to make sure that you're not tugging on your skin, which can be painful.
4. With the thumb and forefinger of your other hand, pinch the tubing right below

your other fingers. Keeping your fingers pinched, slide them down the tubing, pushing any clots down toward the bulb. You may want to use alcohol wipes to help you slide your fingers down the tubing.

5. Repeat steps 3 and 4 as many times as you need to push clots from the tubing into the bulb. If you can't move a clot into the bulb and there is little or no drainage in the bulb, call your doctor or nurse.

## Emptying your drain

You will need to empty your Jackson-Pratt drain 2 times a day, in the morning and in the evening. Follow these instructions when emptying your Jackson-Pratt drain.

### Supplies

- Measuring container your nurse gave you
- Jackson-Pratt Drainage Log
- Pen or pencil

### Instructions

1. Prepare a clean area to work on. This can be done in your bathroom or in an area with a dry, uncluttered surface.
2. Gather your supplies. You will need:
  - The measuring container your nurse gave you
  - Your Jackson-Pratt drainage log
  - A pen or pencil
3. Clean your hands.
  - To wash your hands with soap and water, wet your hands, apply soap, rub them together for at least 20 seconds, then rinse. Dry your hands with a towel and use that same towel to turn off the faucet.
  - If you're using an alcohol-based hand sanitizer, cover your hands with it, rubbing them together until they're dry.

4. If the drainage bulb is attached to your surgical bra or wrap, first remove it from there.
5. Unplug the stopper on top of the bulb. This will make the bulb expand. Don't touch the inside of the stopper or the inner area of the opening on the bulb.
6. Turn the bulb upside down and gently squeeze it. Pour the drainage into the measuring container (see Figure 2).
7. Turn your bulb right side up.
8. Squeeze the bulb until your fingers feel the palm of your hand.
9. Continue to squeeze the bulb while you replug the stopper.
10. Check to see that the bulb stays fully compressed to ensure a constant gentle suction.
11. Don't let the drain dangle.
  - If you're wearing a surgical bra, there will be either a plastic loop or Velcro® straps attached at the bottom. Attach the drainage bulb to the bra.
  - If you're wearing a wrap, attach the drainage bulb to the wrap.
  - It may be helpful to hold your drain in a fanny pack or belt bag.
12. Check the amount and color of drainage in the measuring container. The first couple of days after surgery, the fluid may be a dark red color. This is normal. As you continue to heal, it may look pink or pale yellow.
13. Write down the amount and color of your drainage on your Jackson-Pratt drainage log.
14. Flush the drainage down the toilet and rinse the measuring container with water.
15. At the end of each day, add up the total amount of drainage you had for the day



Figure 2. Emptying the bulb

and write it in the last column of the drainage log. If you have more than 1 drain, measure and record each one separately.

## **Caring for Your Insertion Site**

### **Check for signs of infection**

Once you empty your drainage, clean your hands again and check the area around your insertion site for:

- Tenderness
- Swelling
- Pus
- Warmth
- More redness than usual. Sometimes the drain causes redness about the size of a dime at your insertion site. This is normal.

If you have any of these signs or symptoms, or if you have a temperature of 101° F (38.3° C) or higher, call your doctor. You may have an infection.

Your healthcare provider will tell you if you should place a bandage over your insertion site.

### **Keep your insertion site clean**

Keep your insertion site clean and dry by washing it with soap and water and then gently patting it dry.

# Problems You May Have With Your Drain

<p><b>Problem</b></p> <ul style="list-style-type: none"> <li>• The bulb isn't compressed.</li> </ul>	<p><b>Reason</b></p> <ul style="list-style-type: none"> <li>• The bulb isn't squeezed tightly enough.</li> <li>• The stopper isn't closed securely.</li> <li>• The tubing is dislodged and is leaking.</li> </ul> <p><b>What to do</b></p> <ul style="list-style-type: none"> <li>• Compress the bulb using steps 3 through 9 in "Emptying your Jackson-Pratt drain" section of this resource.</li> <li>• If the bulb is still expanded after following the steps above, call your doctor or nurse. If it happens after business hours, call the next day.</li> </ul>
<p><b>Problem</b></p> <p>There is:</p> <ul style="list-style-type: none"> <li>• No drainage.</li> <li>• A sudden decrease in the amount of drainage.</li> <li>• Drainage around the tubing insertion site or on the bandage covering the tubing.</li> </ul>	<p><b>Reason</b></p> <ul style="list-style-type: none"> <li>• Sometimes string-like clots clump together in the tubing. This can block the flow of drainage.</li> </ul> <p><b>What to do</b></p> <ul style="list-style-type: none"> <li>• Milk your tubing following the steps in the "Milking your tubing" section of this resource.</li> <li>• If there is no increase in drainage flow, call your doctor's office. If it happens after business hours, call the next day.</li> </ul>
<p><b>Problem</b></p> <ul style="list-style-type: none"> <li>• The tubing falls out of your insertion site.</li> </ul>	<p><b>Reason</b></p> <ul style="list-style-type: none"> <li>• This can happen if the tubing is pulled. It rarely happens because the tubing is held in place with sutures.</li> </ul> <p><b>What to do</b></p> <ul style="list-style-type: none"> <li>• Place a new bandage over the site and call your doctor.</li> </ul>
<p><b>Problem</b></p> <ul style="list-style-type: none"> <li>• You have redness greater than the size of a dime, swelling, heat, or pus around your insertion site.</li> </ul>	<p><b>Reason</b></p> <ul style="list-style-type: none"> <li>• These may be signs of an infection.</li> </ul> <p><b>What to do</b></p> <ul style="list-style-type: none"> <li>• Take your temperature. Call your doctor or nurse and describe the signs of infection around your insertion site. Let them know if your temperature is 101° F (38.3° C) or higher.</li> </ul>

Once you know how to care for your Jackson-Pratt drain, you will do it on your own. Your nurse will watch you the first time you empty your drainage to make sure you're doing it correctly. Even after you start caring for it yourself, you can always ask for help. If you have any problems, call your doctor's office.

# Caring for Your Skin After Your Drain Is Removed

Your drain will be removed at your doctor's office. You will have a bandage over the insertion site.

It's important for you to keep your insertion site and the area around it clean and dry. This will help to prevent infection and promote healing of your skin. Caring for your skin after your drain is removed will be different if you had reconstructive surgery.

## Caring for your skin without reconstructive surgery

If you had surgery without reconstruction, follow these guidelines after your drain is removed.

- Remove the bandage after 24 hours.
- You may shower after you remove the bandage but don't take a tub bath or submerge the area in water (such as in a bathtub or swimming pool) until your incision is completely closed and there is no drainage.
- Wash the site gently with soap and rinse the area with warm water. Pat the area dry.
- Inspect the site, using a mirror if necessary. It's normal to have:
  - Slight redness
  - Mild swelling
  - Tenderness
  - A small amount of clear or slightly bloody drainage on the gauze pad

## Caring for your skin with reconstructive surgery

If you had reconstructive surgery, follow these guidelines after your drain is removed.

- Change the bandage every 12 hours as needed.

- Your surgeon will let you know how long to wait before showering after your drain is removed.
- Don't take a tub bath or submerge the area in water (such as in a bathtub or swimming pool) until 6 weeks after your reconstructive surgery.
- Wash the site gently with soap and rinse the area with warm water. Pat the area dry.
- Inspect the site, using a mirror if necessary. It is normal to have:
  - Slight redness
  - Mild swelling
  - Tenderness
  - A small amount of clear or slightly bloody drainage on the gauze pad

## **Call your doctor or nurse right away if you have:**

- Bright red drainage
- A temperature of 101° F (38.3° C) or higher
- Increased redness, tenderness, swelling, pressure or pus at your insertion site
- Skin that is hot to the touch around the surgical sites

## **Call your doctor or nurse during business hours if:**

- The amount of drainage suddenly drops or has increased 100 mL over the past 24 hours
- The tube falls out of your insertion site
- You can't compress the bulb



# Your Jackson-Pratt Drainage Log

JP# \_\_\_\_\_

Date	Comments	Morning	Evening	Total

# Your Jackson-Pratt Drainage Log

JP# \_\_\_\_\_

Date	Comments	Morning	Evening	Total

If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 PM, during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.

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