JACKSON PRATT (JP) DRAINAGE RECORD

JACKSON PRATT (JP) DRAIN

JP drains are often placed in wounds during surgery to prevent the collection of fluid underneath the incision site. This is a closed, air-tight drainage system which operates by self-suction. The drain(s) promote healing by keeping excess pressure off the incision and decreasing the risk of infection. The drain is sutured (stitched) in place at the skin at the site of insertion to promote stability. Clots in the tubing are expected as long as they do not interfere with the drainage collection. The drain(s) is left in place until drainage is approximately 30 cc's or less (or 30 ml's, or 10unce) *per drain for each of 2 consecutive days.* The fluid which collects in the bulb is normally very red at first, changing to more orange or straw-colored the longer it is in place.

EMPTYING THE DRAIN BULB (twice a day, or when full)

- 1. Wash your hands, then remove the plug from the pouring spout. Try to avoid touching the inside of the plug or the spout opening.
- 2. Pour the fluid into a specimen cup. You may squeeze the bulb gently to assist in emptying the bulb.
- Squeeze or compress the bulb firmly with your hands and reinsert the plug into the spout, while keeping the bulb compressed. The self-suction has now been re-established.
- 4. Measure and record the drainage amount in "cc" or "ml" or "oz" on the back of this sheet.
- 5. Flush the fluid down the toilet or sink and wash your hands.
- 6. Measure and record the drainage once or twice a day—usually when you wake up and before going to bed. However, the bulb should also be emptied when it appears half full or halfway expanded.

CALL YOUR DOCTOR OR R.N. (310)582-7107 IF YOU DEVELOP

- Persistent fever over 101 degrees
- Increased redness around the tubing
- The bulb does not stay compressed
- There is a foul odor
- The fluid is yellow or green and cloudy
- There is severe pain at the incision site.
- There is swelling at the incision site.
- There is a great deal of drainage around the drain insertion site.
- The tubing is dislodged or comes out.

If you have any questions, M-F, please call the Cancer Center and ask to speak with the RN.

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Bring this sheet with you when you return to see the doctor after surgery.

Drain	DATE						
No. 1	A.M.						
Side:	P.M.						
R L							
	TOTAL						
Drain	DATE						
No. 2	A.M.						
Side:	P.M.						
R L							
	TOTAL						
		1		T	T	T	
Drain	DATE						
Drain No.	DATE A.M.						
	A.M.						
No.							
No. Side:	A.M.						
No.	A.M.						
No. Side:	A.M.						
No. Side: R L	A.M. P.M. TOTAL						
No. Side: R L Drain	A.M. P.M. TOTAL						
No. Side: R L	A.M. P.M. TOTAL						
No. Side: R L Drain	A.M. P.M. TOTAL DATE A.M.						
No. Side: R L Drain No.	A.M. P.M. TOTAL						
No. Side: R L Drain	A.M. P.M. TOTAL DATE A.M.						