

# After Surgical Procedure Instructions for JP Drain and Surgical Incision

You have been discharged with a Jackson Pratt Closed Suction System, better known as a JP drain. The flat perforated end of the tube is placed inside your body so that it can collect the body fluid that is produced as an effect from surgery. Serous fluid and blood mixed together is called serosanguineous fluid. The drain is designed to collect serosanguineous fluid by way of suction. The drain helps to reduce the risk of infection and seroma (a build up of fluid in the soft tissues). The amount of serosanguineous fluid should decrease each day and the color of the fluid will turn light pink or light yellow. Your surgeon will usually remove the bulb when drainage is below 25 ml per day for two days in a row. On average, JP drains can continue to drain for 1 to 5 weeks. **Keep a log and bring it to the clinic for discussion** so your surgical team can determine the best time to remove the drain.

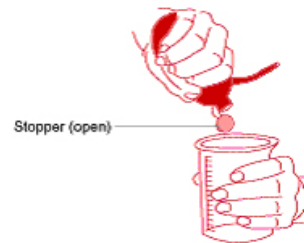


The care of a JP drain requires daily milking of the tubing and pouring out of the fluid contents. Either you or another person can do this task. **Milking or stripping the drain is performed by sliding two fingers along the tubing towards the bulb.** Hold

tubing in place with your thumb and index finger from your left hand and pinch the tubing with your thumb and index finger from your right hand and slide the fluid towards the bulb.



Begin at the place where the tube exits the body. This action pushes the fluid away from the body and into the bulb. It prevents the tube from clogging and keeps the JP drain working correctly. When you empty a JP bulb, unplug the stopper and empty the contents into a



cup that is marked with milliliters. Record the amount each time. (Please see sample of JP Drain log below.) Pour the fluid contents into the toilet. **It is best to milk and drain the JP system three times a day.**

If the bulb fills up halfway then it is time to drain the bulb. After emptying the fluid, squeeze the bulb and place the stopper into the bulb. This action creates the suction needed to draw out the body fluid. When the bulb is compressed, it resembles a donut shape. The bulb will expand as fluid drains. Keep the bulb secure by fastening the bulb to your garment with a safety pin.

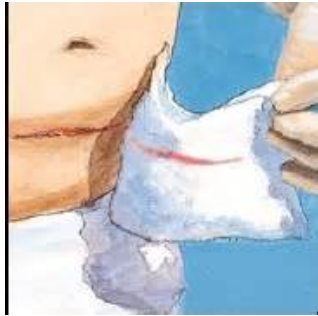
Fasten the bulb below the place where tubing exits the body. There is a tab on the bulb to attach the safety pin. **Wash your hands for 20 seconds before and after touching the JP drain system and dry your hands with a clean towel.** This method reduces the spread of germs.



Squeeze the Bulb and Close the Stopper

## IT IS OK TO TAKE A SHOWER WITH INCISION AND JP DRAIN INTACT

**48 hours** after your surgery **please remove your dressing and take a shower with lots of**



**soapy suds.** In fact, we encourage showering to keep the area clean and dry. Allow soapy water to wash over wound like a water fall. Avoid directly scrubbing the incision and the JP exit site. After taking a shower, pat your wound dry. You can place a clean dressing over the incision and JP exit site if you desire, but leaving the wound open to air is OK at this point. Use a clean towel each time you shower and wear clean clothes every day. Take a



shower once a day. The incision is held together with clips, sutures, steri-strips or dermabond. The JP drain tube is held by a suture to your skin. While showering, secure the bulb to keep it from pulling on the skin or becoming dislodged.

### Sample JP Drain Log

Date	8am	2pm	9pm	Total
July 4	55 ml	45 ml	40 ml	140 ml
July 5				
July 6				
July 7				

### Diet and Activity after Your Surgical Procedure



Water, juice, milk, herbal teas and fruit are recommended for hydration after surgery, about 9 cups per day. Good sources of protein are extremely important for wound healing. Beans, nuts, eggs, chicken, peanut butter, yogurt and whole grains are all good sources of protein. Moderate exercise, like a 10 minute walk and leisure activities around

the house, is a good way to regain your strength and help speed your recovery. Avoid household chores and lifting heavy items until you have fully recovered, about a 2 to 8 week period. Please check with your physician for more details about your recovery time. Take the prescribed pain medications as directed. Pain can hinder you from moving about.

## 10 REASONS TO CALL YOUR NURSE OR DOCTOR

1. Fever greater than 100.4
2. Bulb does not hold suction
3. Tubing falls out of the body
4. Signs of infection – pus, swelling, increased redness bigger than a dime, warm to touch, uncontrolled pain, foul odor
5. Incision opens up
6. Drainage increases by more than 100 ml per day
7. Drainage stops
8. Drainage turns to a bright red color when it was a light pink color
9. Fluid leakage is noted on your dressing or garments
10. Tubing shows cloudy, murky drainage



## 10 THINGS TO AVOID DOING WHILE RECOVERING

1. **Do not soak in a bathtub, Jacuzzi, or pool.**
2. **Avoid applying hydrogen peroxide to wound/JP exit site.** Soap and water are the best agents to keep the wound clean.
3. **Avoid smoking. It delays wound healing.**
4. Avoid separating the JP bulb from tubing in attempt to pull out fluid strands or to flush out tubing. The JP system must remain together to keep the germs from entering the wound.
5. Avoid applying powders, lotions or creams to wound/JP exit site. Drinking the recommended fluids is the best way to keep skin hydrated.
6. Avoid wrapping the tubing in loops. It must remain patent for continuous suction.
7. Avoid overexertion. Overexertion can cause pain and seroma formation.
8. Avoid lying or sleeping on your incision or JP drain.
9. Avoid drinking alcohol. It delays wound healing
10. Be careful while taking a shower. Have someone help you take a shower. Do not bend over to reach your knees or feet. Use a shower mat and use a shower chair to prevent from falling.



Please call your surgeon's clinic for further questions or concerns.

