

Home-care instructions for a PTC drain

A PTC drain (Percutaneous Transhepatic Catheter) has been placed into your body. It is a plastic tube that goes through the skin into the bile duct or to the bile duct and then into the small intestine.

The aim is to allow the bile to flow without obstructions into the gastrointestinal tract or into a drainage bag at the end of the drain.

PTC is used to ease symptoms that occur when bile flow is obstructed.

The symptoms include yellow skin, itching, and pain.

If you have a drainage bag attached to the drain, make sure the bag is attached tightly.

The drain must remain straight so that it does not fold over.

The drain must be flushed 2 times a day, usually with 5 ml of saline solution (NaCl 0.9%). This is done to make sure the drain remains open.

Sometimes, your doctor may give you different instructions on how to flush the drain. In that case, follow those instructions.

For the flushing, you will need a sterile single-use syringe, flushing liquid, a cap, dressings, and tape.

The unit responsible for your care will tell you where to get the equipment.

How to flush the drain

- Wash your hands with soap and water and dry them carefully.
- Place the flushing liquid, the syringe, and a spare cap on a table.
- Draw flushing liquid into the syringe and place the syringe back into its protective sheath to wait for use.
- Open the three-way stopcock by turning it. Be careful not to touch the area where the three-way stopcock and the cap connect. Place the cap on the table so that the section that will be attached to the stopcock is facing up.
- Insert the syringe into the three-way stopcock as in image 1.
- Turn the three-way stopcock open as in image 2.
The three-way stopcock is now open towards the syringe and the drain's insertion site.
- Slowly press the plunger into the syringe to inject the flushing liquid.
Do not draw fluid back into the syringe.
If you experience pain, wait a little while and continue the flushing once the pain has passed.
- Close the three-way stopcock towards the syringe as in image 1 and remove the syringe.
- Close the old cap.
Replace the cap with a new one every 3 days.

Image 1

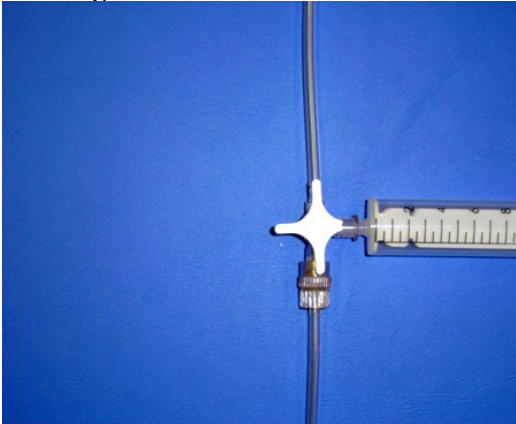


Image 2



Drainage bag

The drainage bag is usually used for only 2 days. Then the bag will be removed. At the same time, you need to cap the end of the three-way stopcock where the bag was attached.

However, your doctor may instruct you to use the drainage bag for longer than this. In this case, follow these instructions:

- keep the drainage bag below the drain's insertion site so that the bile will not move back and forth inside the drain
- replace the drainage bag with a new one at least once a week

- Empty the drainage bag through the valve at the bottom of the bag.

Caring for the drain site

- If the insertion site does not excrete, it does not need any special care.
- If the dressing or tape on the drain gets wet with water or excretion from the insertion site, replace the dressing or tape with new ones.
- When you shower, you may
 - remove the tape on the insertion site and shower the area with water. Carefully dry the insertion site with a clean towel and place a new dressing
 - cover the tape with plastic wrap, for example. Attach plastic wrap on your skin firmly with tape.
- Replace the tape on the insertion site at least once a week.
- If the insertion site is moist or excretes fluid, clean the area at least once a day. You can clean the area with water or with a disinfectant. Moisten some gauze or a cotton ball with a disinfectant.

General information

- You can move about and work normally as your condition allows you to.
- Do not have a sauna, bathe or swim.
- The cleaning and flushing supplies can be disposed of with household waste.
- Mind the drain so that it does not get caught in shirt buttons, for example, and come off.
- If you have any questions about the drain's home care, please contact the outpatient clinic or ward in charge of your care.

Contact the outpatient clinic or ward in charge of your care if you experience any of the following:

- Plenty of bile excretes from the drain's insertion site, or the insertion site is red, swollen or hot to touch.
- You have a fever of over 38°C
- Your skin turns yellow or your jaundice worsens
- Your stool turns gray.
- The flushing liquid does not enter the drain or it flows out from the insertion site.
- You have nausea, vomiting, or pain.
- The drainage becomes bloody.
- You suspect that the drain is broken or has come off.



Patient Instruction
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