PROPERLY READ THE PLEUR-EVAC® AIR LEAK METER

- Read air leak meter at the bottom
- Note how many columns are bubbling
- Document the highest column with bubbles. For example, air leak bubbling in column 7 equals air leak 7

Always refer to the Instructions for Use packaged with each unit.

FOR MORE THOROUGH GUIDELINES, ALONG WITH OTHER EDUCATIONAL MATERIALS, PLEASE CONTACT CUSTOMER SUPPORT 877-886-3487

HAS YOUR PATIENT DEVELOPED AN AIR LEAK?
A Quick Reference Guide

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Teleflex is a global provider of medical products designed to enable healthcare providers to protect against infections and improve patient and provider safety. The company specializes in products and services for vascular access, respiratory, general and regional anesthesia, cardiac care, urology and surgery. Teleflex also provides specialty products for device manufacturers.

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CHECK FOR TIDALING*

- Assess for fluctuations or tidaling in the water seal or air leak meter chamber
- The water level should rise during inspiration (negative) and fall during expiration (positive) in a spontaneously breathing patient
- If the patient is on mechanical ventilation, the fluctuation pattern will be just the opposite
- If there is no tidaling, the tubing may be occluded by a clot or kink, or the lung may be fully re-expanded

CHECK FOR AIR LEAKS*

- Bubbles are seen in water-seal or air leak meter chamber
- Tidaling is absent or less obvious
- Determine the location of the air leak

*Note: Temporarily disconnect suction to correctly assess for tidaling and air leaks. You may need to wait a few minutes after taking the patient off suction to assess.

DETERMINE THE TYPE OF AIR LEAK

Starting at the chest tube insertion site, momentarily clamp off the tubing with a booted (or padded) clamp. Does the air leak meter stop bubbling?

YES: The leak originates from inside the patient
NO: The leak originates somewhere in the system

PATIENT AIR LEAK

- Assess at frequent intervals (i.e., every 4 hours) to evaluate progression or resolution
- Disconnect suction. Observe during natural respiration and instruct patient to cough. This forces expiration, during which air usually leaves the pleural space
- Assess and document degree of air leak using the Pleur-evac® Air Leak Meter: 1 = low to 7 = high
- Notify physician of new or increased air leak

SYSTEM AIR LEAK

- Continue the clamping process down the tubing at 8–12 inch (20–30 cm) intervals until you find the origin of the leak
- Tighten all connections
- Tape connection between patient drainage tube and thoracic catheter

For proper connection between patient drainage tube and thoracic catheter, refer to Association of Critical-Care Nurses procedures.

- If air leak is in the chest drainage system, replace the system
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