



Policy Name BILIARY DRAINAGE/FLUSHING	Policy Number: 0244
	Effective Date: April 20, 2011
Approved By: Management	Date Revised:
Classification: Pain and Symptom Management	Page No: Page 1 of 4

POLICY

Registered Nurses are able to drain biliary catheters/drains using appropriate standards and procedures. It is common for biliary drains to be attached to a drainage bag for continuous drainage of bile fluids. If intermittent drainage is required, a physician's order is required indicating the frequency of drainage and the volume to be drained. *Aseptic technique* is used for biliary catheter dressing changes and changing of the drainage bag. *Clean technique* is used for emptying a continuous drainage bag.

PROCEDURE

Continuous Drainage

When continuous drainage of the biliary drain is required, the collection bag and dressing should be changed every seven (7) days and as necessary. Each time the collection bag is emptied, the drainage valve **must** be cleaned with an alcohol swab prior to and after drainage. If the drainage valve is "dirty", the entire drainage system is to be changed as per policy.

Required Equipment

- Litebag 600 deluxe drainage bag with tubing attached
- Sterile gloves
- 2 sterile 4X4 gauze (used to pick up/hold tubing)
- 2 chlorhexidine and alcohol swabs
- 2 sterile 4X4 gauze or drain gauze
- 1 large occlusive dressing (tegaderm)
- plastic clamp
- normal saline and 10 ml syringe **if flush ordered**

Changing of Biliary Drainage Bag and Dressing

1. Prepare a clean surface.
2. Wash hands thoroughly.
3. Open packages to create a sterile field for materials.
4. Clamp the new drainage bag.
5. Place end of new drainage bag tubing on sterile surface.



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6. Wearing non-sterile gloves, remove resident's biliary catheter dressing.
7. Clamp the biliary catheter.
8. Remove non-sterile gloves, wash hands and put on sterile gloves.
9. Using sterile 4X4 gauze to pick up the tubing, cleanse around the cap of the biliary catheter with alcohol swab for thirty (30) seconds and disconnect the old bag from the biliary catheter.
10. Cleanse the end of the biliary catheter with an alcohol swab for thirty (30) seconds before attaching the new drainage connection tubing and drainage bag.
If ordered, flush the biliary catheter with the prescribed amount of sterile normal saline.
11. Attach the new drainage bag connection tubing to the biliary catheter.
12. Cleanse the biliary catheter insertion site with chlorhexidine swabs and the catheter with alcohol swabs. *Always cleanse from the site moving in an outwards direction.*
13. Assess the site noting any changes or signs of infection, suture status and/or problems with the catheter. Report any concerns to the physician.
14. Apply sterile drain gauze and 4X4 gauze over the insertion site.
15. Apply an occlusive dressing over the top of the 4X4 gauze insuring that the edges of the gauze are covered and sealed. Write the date on the occlusive dressing and initial.
16. Unclamp the biliary catheter.

Intermittent Drainage

A physician's order must be written indicating the frequency of drainage and volume to be removed through the biliary catheter.

Required Equipment

- Litebag 600 deluxe drainage bag with tubing attached
- Injection cap
- Sterile gloves
- 2 sterile 4X4 gauze (used to pick up/hold tubing)
- 2 chlorhexidine and 4 alcohol swabs.
- 1 sterile drain gauze
- 2 sterile 4X4 gauze (for the dressing)
- 1 large occlusive dressing (tegaderm)
- Plastic clamp
- Normal saline and 10 ml syringe **if flush is ordered**

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Drainage of Biliary Fluid

1. Prepare a clean surface.
2. Wash hands thoroughly.
3. Open packages to create a sterile field for materials.
4. Clamp the new drainage bag.
5. Place end of the new drainage bag tubing on sterile surface.
6. Wearing non-sterile gloves, remove resident's biliary catheter dressing.
7. Place end of biliary catheter on sterile surface.
8. Ensure the biliary catheter is clamped.
9. Remove non-sterile gloves, wash hands and put on sterile gloves.
10. Using sterile 4X4 gauze to pick up the tubing, cleanse around the cap of the biliary drain for thirty (30) seconds with an alcohol swab, then remove the cap.
11. Cleanse the end of the biliary catheter with alcohol swab for thirty (30) seconds before attaching the drainage connection tubing and drainage bag.
12. Attach the tubing to the biliary catheter.
13. Open the clamp on the biliary catheter and drain prescribed volume. If prescribed volume is >600 mls, clamp the biliary catheter and empty the drainage bag when full so that continued drainage may occur, if needed.
14. When drainage is complete, clamp the biliary catheter and disconnect the drainage tube and bag from the catheter.
If ordered, flush the biliary catheter with prescribed amount of sterile normal saline.
15. Cleanse the end of the biliary catheter with an alcohol swab for thirty (30) seconds and attach a new sterile injection cap.

Dressing Change

1. Cleanse the biliary catheter insertion site with chlorhexidine swabs and the catheter with alcohol swabs. *Always cleanse from the insertion site moving in an outwards direction.*
2. Assess the insertion site noting any changes or signs of infection, suture status and/or problems with the catheter. Report any concerns to the physician.
3. Apply sterile drain gauze over the insertion site.
4. Coil the biliary catheter on top of the drain gauze and cover with sterile 4X4 gauze.
5. Apply an occlusive dressing over the top of the 4X4 gauze insuring that the edges of the gauze are covered and sealed. Write the date on the occlusive dressing and initial.



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Disposal of Biliary Drainage

1. Note the color, consistency and amount of the biliary drainage.
2. Drain the contents of the drainage bag into a urinal or graduated cylinder and/or empty into the toilet and flush.
3. Dispose of any used bag, tubing, and/or dressing into a plastic garbage bag for disposal with the regular garbage.

Documentation

1. Document on the resident's progress notes including:
 - the amount and color of the drainage;
 - the appearance of the insertion site and suture if present;
 - the dressing change;
 - resident's tolerance of the procedure.
2. Note in the resident's care plan any specifics of the dressing change, drainage procedures or resident's concerns as reference for other staff.

ATTACHMENTS

Gallini Medical Devices – Product Description Sheet – Litebag and Litebag Deluxe.

CROSS REFERENCE

Policy #0243 - Peritoneal Drainage (using Cook or Tenckhoff Catheters)

REFERENCE

Alberta Health Services (AHS)-Home Care Policy and Procedure Manual- Peritoneal Drainage (using Cook or Tenckhoff Catheter) – Policy # VI.G.10