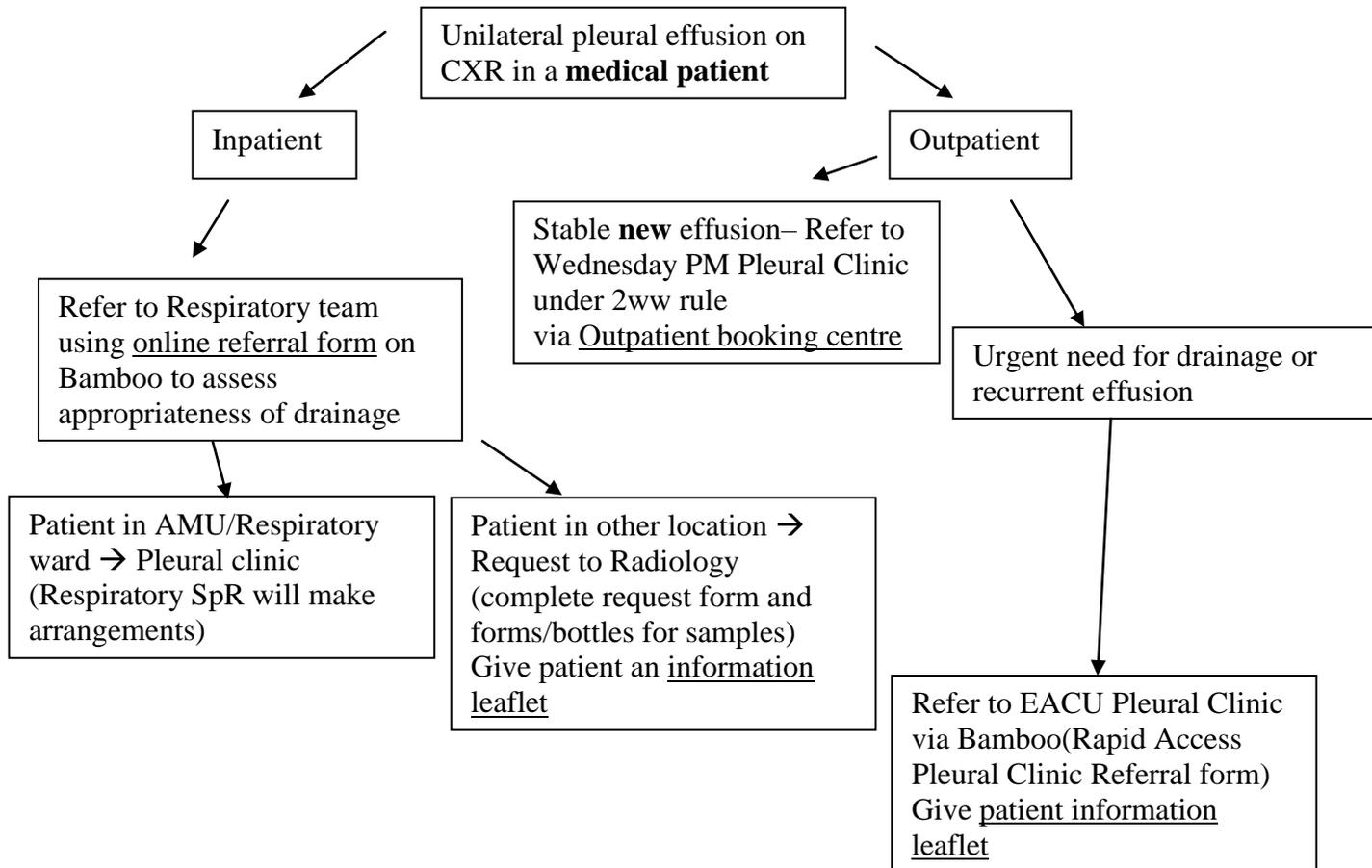


BSUH pleural pathway

RSCH Pleural pathway



Patient info leaflets - [Click here](#)

Or go to www.bsuh.nhs.uk > your visit > patient information and search 'pleural'

Updated : Dr A Gurung, ST5, Sept,2019

Lead Consultant: Dr J Messenger

The Ambulatory Pleural service provides senior review to determine the appropriateness of a pleural procedure and which procedure is required. All planned procedures are done under ultrasound guidance during the Monday and Thursday morning clinics.

Once a referral is made, we will organise admission to EACU in the next available appointment slot. If patient becomes breathless while waiting for an appointment please advise them to contact EACU admin team.

Procedures offered – diagnostic pleural tap, therapeutic pleural aspiration, chest drain insertion, long-term pleural drains

If the patient to be referred is on anticoagulation, they must be given advice on this at the point of referral.

If the patient is at low risk of thrombosis the following advice will apply –

Clopidogrel (stop 7 days before)

Warfarin (stop 5 days before – INR must be ≤ 1.4)

DOACS (stop 48 hours before)

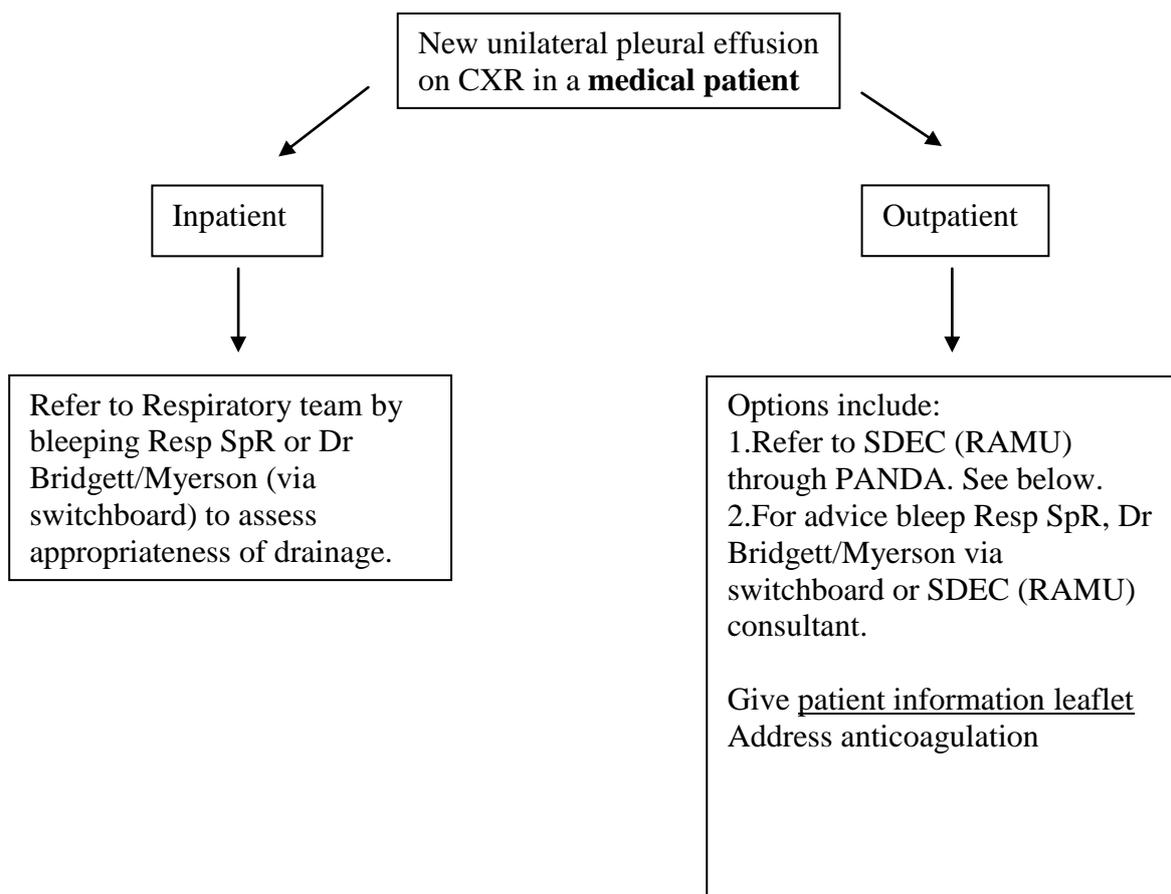
Tinzaparin (stop 24 hours before)

If the patient is high risk –

Consult BSUH anticoagulation bridging guidelines

To make a referral to the RSCH pleural clinic please fill out the [online referral form](#) via Bamboo/Panda.

PRH Pleural pathway



Lead Consultant: Dr J Myerson

There is no regular pleural clinic at PRH. However, patients can be booked into SDEC (RAMU) to have a respiratory review and consideration of pleural drainage.

The SDEC referral is through PANDA is labelled as **SDEC-RAMU Assessment Form (PRH)**. When completing the form please mention that the patient should be booked into a day when Dr Bridgett Respiratory Consultant is working. This is normally Mondays, Thursdays and most Wednesdays however Dr Bridgett splits his time with SDEC and Pyecombe. The patient will be booked in, reviewed, drained if appropriate and follow up if required will be organised. You can contact Dr Bridgett directly mbridgett@nhs.net if you need to discuss things in more detail.

SDEC can provide diagnostic taps, therapeutic aspirations, chest drain insertions and talc pleurodesis. For Long Term Pleural Catheters the patient should be referred to the Pleural Clinic at the RSCH.

If the patient to be referred is on anticoagulation, they must be given advice on this at the point of referral. We cannot perform certain procedures if the patient is anticoagulated.

If you are a trainee and keen to perform pleural procedures please contact the SDEC nurses or Dr Bridgett and we will try to accommodate this.

If the patient is at low risk of thrombosis the following advice will apply –

Clopidogrel (stop 7 days before)

Warfarin (stop 5 days before – INR must be ≤ 1.4)

Rivaroxaban and Tinzaparin (stop 24 hours before)

If the patient is high risk –

Consult BSUH anticoagulation bridging guidelines