

**Patient  
Information**

# Pleural aspiration (Pleural tap)

## Introduction

This leaflet provides information about the pleural aspiration procedure.

## What is pleural aspiration (pleural tap)?

Pleural aspiration is a procedure to remove fluid from the chest. In some conditions, fluid can collect between the outside of the lung and the chest wall which may make it difficult to breathe. If this happens a pleural aspiration can be performed to relieve breathlessness.

Pleural aspiration is also used to obtain samples of fluid, which can be tested to try and find out what has caused the problem.

## How is pleural aspiration done?

Pleural aspiration is a simple procedure which can be done as a day case on the ward, or in clinic. It is usually performed with you sat on the edge of a bed or chair, leaning forward slightly.



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Department

**Respiratory**

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An ultrasound scan is performed first to identify the best site for aspiration.

The skin is cleaned with antiseptic and a needle or thin tube is inserted into the chest, between the ribs.

## Patient Information

Fluid can then be withdrawn using a syringe.

Local anaesthetic can be used to numb the skin if necessary.

After the procedure, a dressing is put over the aspiration site, which you can remove after 24 hours.

After the procedure your doctor may send you for a chest X-ray.

You will be observed for up to an hour before you go home.

## Are there any risks?

There may be some brief discomfort but this is usually minor and similar to having blood taken.

The risk of serious complications from pleural aspiration is very low.

As with any invasive procedure, there is a small risk of introducing infection into the chest or of causing bleeding. The risk of severe bleeding or damage from the needle is very low.

Occasionally, air can enter the chest through the needle or can leak out from a hole in the lung. Rarely this may require a chest drain to be inserted and admission to hospital to resolve the problem.

## Contact information

If you become unwell after the procedure or you require more information, please contact the Respiratory Ward, Dr Steer or Dr Bintcliffe's secretary.

### Respiratory Ward

8<sup>th</sup> Floor

Gloucestershire Royal Hospital

Tel: 0300 422 6760

### Dr Steer's secretary

Tel: 0300 422 6121

Monday to Friday, 9:00am to 5:00pm

### Dr Bintcliffe's secretary

Tel: 0300 422 4346

Monday to Friday, 9:00am to 5:00pm

## Patient Information

### Further information

You can find more information about pleural aspiration by visiting the website below.

#### Patient.info

Website:

[www.patient.info/chest-lungs/pleural-effusion-leaflet](http://www.patient.info/chest-lungs/pleural-effusion-leaflet)

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## Making a choice

### Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



### Ask 3 Questions

**To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.**

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

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\* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85.



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>