## **Imaging Department**

## Procedure information leaflet

## Name of procedure: Percutaneous drainage of abscess (CT guided)

It has been recommended you have your abscess drained using CT guidance (computerised tomography, which is a specialised form of X-ray). The drainage will be performed by inserting a needle and a fine plastic tube (called a drainage catheter) through a small cut in the skin.

You will be asked to lie on a couch which moves through a large ring, rather like a doughnut, you will not be enclosed in a tube. Within the ring of the scanner there is a source of X-rays and on the opposite side X-ray detectors. Thin beams of X-rays are passed through your body; pictures are produced using a computer showing a cross-section of your body and organs.

The cross-sectional images are used to locate the abscess and the best approach to make. Your skin will then be cleaned with antiseptic solution and local anaesthetic injected into a small area of skin and the surrounding tissues to minimise the discomfort associated with the procedure. You may be asked to hold your breath for 5-10 seconds whilst the needle is inserted, this should not be painful but you may feel some discomfort and pressure, a sample will usually be taken.

A number of techniques are available to your doctor for draining the abscess. The fluid may simply be aspirated through the needle or a slightly larger needle may be inserted, more commonly a fine plastic tube will be inserted. This tube will then be attached to your skin so that fluid can drain into a bag. This tube may be need to left in for some days; your doctor will discuss this with you.

This leaflet explains some of the benefits, risks and alternatives to the procedure, to help you make the best, informed decision as to your treatment. Please ask your radiological team about anything you do not fully understand or want to be explained in more detail.

We recommend that you read this leaflet carefully. You and your doctor (or other appropriate health professional) will also need to record that you agree to have the procedure undertaken by signing a consent form, which your health professional will give you.

#### Intended benefits of the procedure

The aim of the procedure is to drain your abscess and obtain a sample for a laboratory diagnosis.

#### Serious or frequent risks

Your doctor has decided to recommend you have this procedure undertaken to help in your continuing treatment, in so doing he has balanced the benefits against any potential risks associated with it.

Percutaneous drainage of abscess is considered to be a safe procedure. Occasionally complications can arise because of the test's invasive nature. These include:

- $\circ$  Bleeding;
  - Internal bleeding from the puncture site can occur. This bleeding will normally stop on its own. Occasionally the bleeding is more severe and a blood transfusion may be required.
- o Infection;
- Discomfort.

- > There is a small risk of infection at the site of insertion of the tube.
- Reaction to local anaesthetic;
  - > There is a small risk of a reaction to the drug used.
- Accidental injury to other organs;
  - There is a small risk of injury to other organs including the lung, liver or bowel depending on the site the needle insertion. This complication is substantially reduced by the use of the CT guidance.

CT scanning involves the use of X-rays, and so has the usual risks associated with ionising radiation. Female patients who are or might be pregnant must inform a member of staff in advance. The amount of radiation is more than is used for an ordinary X-ray of the chest or body, and is equal to the natural radiation we all receive from the atmosphere over a period of approximately 3 years. This adds very slightly to the risk of, for example, developing a cancer. However, as one in three of us will develop a cancer at some stage during our lives, the added risk is very small, and also the risks from missing a serious disorder by **not** having a CT scan are considerably greater.

Many CT examinations involve you having a contrast medium injected into a vein in order to increase the amount of information obtained from the scan. The injection usually causes nothing more than a warm feeling passing around your body. There is a slight risk of an allergic reaction to the injection, such as a skin rash, but it may lead to an asthmatic attack or other significant complication. The doctors in the radiology department are trained to deal with any complications and again the risk involved is very small. If you had a reaction to a previous injection of contrast material given for a kidney X-ray (IVP/IVU) or a previous CT scan you should tell the radiographer at the time of your examination.

You will be cared for by a skilled team of doctors, nurses and other healthcare workers who are involved in this type of procedure every day. If problems arise, we will be able to assess them and deal with them appropriately. As with all invasive procedures, there is a very small risk that you may die from complications of the procedure.

#### Other procedures that are available

The alternative treatment options are to undergo surgery, have conservative treatment with antibiotics but no drainage, or sometimes ultrasound guided drainage can be undertaken. Your doctor can discuss this with you.

#### Your anaesthetic

A general anaesthetic is not usually required but as indicated above some local anaesthetic will be injected to help ensure that you are comfortable during the procedure.

## Preparation for your procedure

You may have a blood coagulation test carried out before the drainage. You will be informed of the arrangements for this test.

You can usually continue with your normal medication before your procedure, except those listed below in which case please inform your doctor and the radiology department. Please bring any medication you take with you, particularly if you are to be admitted.

## Your normal medication

We will usually ask you to continue with your normal medication (except as instructed below) during your stay in hospital, so please bring it with you.

### Aspirin

If you are taking aspirin regularly, please stop 5 days before the biopsy unless you have a high risk indication. eg have had a cardiac stent inserted within the last twelve months.

#### Clopidogrel, Dipyridamole, Cilastozol or Prasugrel

If you are taking any of these regularly please ring the Imaging department on 01527 512099. We will need to know why you are taking this medication and discuss this with you. You will need to stop taking these prior to your procedure, but this should only be done after discussion with the Referring Clinician.

#### Warfarin, Dabigatran and Rivaroxaban

If you are taking any of the above, it may need to be stopped prior to the procedure and alternative medication should be arranged with your referring Clinician. Please ring the Imaging department on 01527 512099. We will need to know why you are taking this and what your target INR is.

## On the day of the procedure

You may have been admitted as an emergency and already be on a ward, otherwise, you should attend your appointment 15 minutes before the stated time. Following the procedure you will usually be admitted for observation for a period of a few hours or until your doctors are satisfied the abscess is fully drained.

Prior to the examination the Consultant Radiologist who will be carrying out your procedure will be available to answer any queries you may have. Please let us know in advance if you are allergic to any antibiotics or other drugs.

## During the investigation

In the examination room you will be made comfortable on the scanner couch. The procedure will then be performed as described above.

## After your investigation

We will usually take you to a ward where you will be looked after by the nursing staff. You may feel some discomfort in relation to the site of the drainage.

## Leaving hospital

#### Length of stay

How long you will be in hospital varies from patient to patient and depends on how quickly you recover from the procedure.

#### Medication when you leave hospital

Before you leave hospital, the pharmacy will give you any extra medication that you need to take when you are at home.

#### Convalescence

How long it takes for you to fully recover from your biopsy varies from person to person. It can take one to 2 days.

Once home, it is important to rest quietly for the remainder of the day.

If you have any of the following;

- excessive bleeding from the biopsy site;
- experience excessive sweating;
- o experience excessive shivering; or
- o generally feel unwell.
- Increasing pain

Please contact your doctor.

#### Wound

A dressing will usually be applied over the site after the test. It will be replaced as required, particularly if a tube has been inserted.

#### Exercise

You should not participate in strenuous sports for the first 10 days after your procedure. You should avoid heavy lifting and carrying heavy shopping.

#### Driving

You should not drive until you feel confident that you could perform an emergency stop without discomfort. It is your responsibility to check with you insurance company.

#### Work

When you return to work will depend on your job. If your job does not include manual work or lifting you may be able to return to work 2 days after the procedure.

#### Test results

We will normally send the sample to a special laboratory in the hospital for tests. The results will not be available on the day of the examination. They will be sent to your referring consultant who will usually either write to you or arrange an out patient appointment.

#### Please let the Imaging Department before attending for your examination know if you have;

- had a heart valve replacement;
- suffered from endocarditis; or
- had a pulmonary shunt inserted.
- Are taking any of the drugs mentioned above
- Any allergies

## **Contact details**

If you have any specific concerns that you feel have not been answered and need explaining please contact the following.

- Appointments Clerk, Radiology Booking Office, Alexandra Hospital,
- Phone 01527-512099

## **Additional Information**

The following Internet websites contain additional information that you may find useful:

- o www.patient.co.uk
  - Information fact sheets on health and disease.
- www.radiology info.org
  - For information on a wide range of radiological procedures.
- o www.nhsdirect.nhs.uk

• On-line Health Encyclopaedia and Best Treatments Website.

#### Patient Services Department

It is important that you speak to the department you have been referred to (see the contacts section) if you have any questions (for example, about medication) before your investigation or procedure.

If you have any concerns about your treatment, you can contact the Patient Services Department on 0300 123 1733. The Patient Services staff will be happy to discuss your concerns and give any help or advice.

If you have a complaint and you want it to be investigated, you should write direct to the Chief Executive at Worcestershire Acute Hospitals NHS Trust, Charles Hastings Way, Worcester WR5 1DD or contact the Patient Services Department for advice.

# Please contact Patient Services on 0300 123 1733 if you would like this leaflet in another language or format (such as Braille or easy read).

#### Bengali

"আপনি যদি এই লিফলেটটি বিকম্প কোনো ভাষায় বা ফরমেটে (যেমন ব্রেইল বা সহজ পাঠ) চান, তাহলে এই নম্বরে 0300 123 1733 প্যাশেন্ট সার্ভিসের সাথে যোগাযোগ করুন।"

#### Urdu

اگرآپ کویہ دستی اشتہار کسی مُتبادل زُبان یا ساخت میں چاہیے (جیسے کہ بریل/ ایزی ریڈ) تو پیشنٹ سروسز <u>ء 1733 123 0300 پر رابط</u>ه کریں.

#### Portuguese

"Por favor, contacte os Serviços de Apoio ao Paciente através do número 0300 123 1733, caso precise deste folheto numa língua alternativa ou formato (como Braille / fácil de ler)."

#### Polish

"Jeżeli pragniecie Państwo otrzymać tę broszurę w innym jeżyku lub formacie (Braille / duży druk) proszę skontaktować się z Obsługą Pacjentów pod numerem 0300 123 1733."

#### Chinese

"如果您需要此份傳單的其他語言選擇或其他版本

(如盲人點字版/易讀版容易的閱讀),請致電 0300 123 1733與病患服務處聯繫。"

#### Comments

We would value your opinion on this leaflet, based on your experience of having this procedure done. Please put any comments in the box below and return them to the Clinical Governance Department, Finance Department, Worcestershire Royal Hospital, Charles Hastings Way, Worcester, WR5 1DD.

Name of leaflet:	Date:
Comments:	
Thank you for your help.	
	Corporate member of Plain English Campaign. 312 Committed to clearer communication.

Investigative procedure information leaflet ALX CT guided aspiration of abscess