JP DRAIN INFORMATION AND INSTRUCTIONS

During your surgery, one or two drains may have been placed in your surgical wound. They are referred to as Jackson-Pratt or JP drains. The drain consists of a plastic tube with one end in your wound and the other end attached to a suction bulb. They help prevent fluid from collecting under your incision. Allowing the fluid to drain promotes healing and helps prevent infection. Drains remain in until drainage is slow enough for your body to reabsorb the fluid on its own. The drain(s) is removed very comfortably in the office.

How to empty your JP drain:

1) Wash your hands thoroughly before emptying your drain(s).
2) Un-pin or un-tuck the drain from your clothing
3) Open the drain stopper and squeeze the drain contents into a measuring cup.
4) Try to prevent the top of the drain or stopper area from touching other surfaces
5) Squeeze all the air out of the drain with one hand and replace the stopper. This will create suction necessary for the fluid to drain.
6) Re-pin or re-tuck the drain to your clothing to help keep it from accidentally pulling out
7) Wash your hands
8) Record the measured drainage in your JP Log
9) Bring your JP log to every appointment after surgery until the drain is removed.

Empty your drain once a day or when it is full. At first, emptying the drain several times a day may be necessary, but this will slow down with each passing day. Record the amount each time you empty the drain and add each day’s amounts so that 24hr total output can be measured.