

Special Procedures

S-1 Pleural Decompression

Approved Sites for Pleural Decompression

Lateral: 4th or 5th intercostal space in mid-axillary line (preferred)

Anterior: 2nd intercostal space in mid-clavicular line

Procedure

Pleural decompression may only be used on an unstable patient **AND** has decreased or absent lung sounds on one side of the chest.

This procedure may be performed during transport.

1. Locate one of the approved sites for decompression.
2. Prepare the site using proper sterile technique.
3. Attach a 10mL syringe to a minimum size 14 gauge angiocath that is 3 inches long.
4. Insert the angiocath at a 90 degree angle over the superior edge of the rib. Advance until a rush of air is heard. Air should be freely aspirated, if not, the needle is not in the pleural space.
5. Remove the needle and syringe.
6. Attach one-way valve or stopcock.
7. Secure the angiocath to the chest wall.
8. Check for lung sounds bi-laterally.
9. Continuously monitor and reassess the patient as needed.
10. Document the procedure and notify the receiving hospital as early as possible.

DISRUPTED COMMUNICATIONS

In the event of a "disrupted communications" situation, Solano County Paramedics may utilize all portions of this treatment protocol without Base Hospital Contact as needed to stabilize an immediate patient.